



Child Care and Development Fund (CCDF) Plan

for

State/Territory:

IOWA

DRAFT - 9/25/15 – CONTENTS SUBJECT TO CHANGE

[NOTE: OCC released a new preprint version on 9/28/15. Those changes are not reflected in this document]

FFY 2016-2018

This Plan describes the CCDF program to be administered by the State/Territory for the period 10/1/2015 – 9/30/2018. As provided for in the applicable statutes and regulations, the Lead Agency has the flexibility to modify this program at any time, including amending the options selected or described.

For purposes of simplicity and clarity, the specific provisions printed herein of applicable laws are sometimes paraphrases of, or excerpts and incomplete quotations from, the full text. The Lead Agency acknowledges its responsibility to adhere to them regardless of these modifications.

Public reporting burden for this collection of information is estimated to average 162.5 hours per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

Form ACF-118 Approved OMB Number XXXX-XXXX expires XXXX

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Introduction and How to Approach Plan Development

Access to stable, high quality child care and early learning experiences improves the odds of success for two generations – parents and children - that rely on child care across the country. The Child Care and Development Fund (CCDF) provides resources to State, Territory, and Tribal grantees to enable low-income parents to work or pursue education and training so that they may better support their families while at the same time promoting the learning and development of their children. The CCDF also provides funding to be used to enhance the quality of child care for all children.

On November 19, 2014, President Obama signed the bipartisan-supported Child Care and Development Block Grant (CCDBG) Act of 2014 into law (Pub.L. 113-186) (https://www.acf.hhs.gov/sites/default/files/occ/child_care_and_development_block_grant_markup.pdf). The law reauthorizes and significantly revises the purposes of the CCDF program and requirements for State and Territory grantees. The law establishes minimum child care assistance eligibility periods, health and safety standards and training requirements for providers, monitoring, consumer information and other components that when fully implemented will strengthen child care in this country and support child and family success.

States and Territories must comply with the provisions of the Child Care and Development Block Grant (CCDBG) Act, as revised by reauthorization. The Office of Child Care (OCC) has provided interpretive guidance on the new requirements of the law through Program Instructions or responses to Frequently Asked Questions, which are available at: <http://www.acf.hhs.gov/programs/occ/ccdf-reauthorization>. Pending the issuance of implementing regulations, States and Territories are to comply with the law based on their reasonable interpretation of the requirements in the revised CCDBG statute. Further Federal clarification through guidance and regulation is forthcoming. Once final rules are issued, any States and Territories that do not fully meet the requirements of the regulations will need to revise their policies and procedures to come into compliance, and file appropriate Plan amendments related to those changes.

CCDF Plan Overview. The Administration for Children and Families (ACF) re-designed the CCDF Plan to assist State and Territory grantees to plan for full implementation of the law. We recognize that the CCDBG Act of 2014 includes a significant number of changes, some of which are straightforward to implement, while others are complex and will be phased-in over several years. The level of effort needed for implementation will vary across the country depending on the number of changes a State or Territory needs to make. We encourage all States and Territories to take time to think systematically and consider large-scale changes to advance a coherent vision for their child care programs and achieve the goals of the reauthorization – that is, to improve the health, safety, and quality of child care and to improve low-income working families' access to child care assistance and care that promotes child development. Some States and Territories will need time to enact changes through their legislatures or rulemaking processes. In addition, some requirements will take time to fully operationalize. ACF will work with States and Territories to ensure that adoption and implementation of these important changes is done in a thoughtful and comprehensive manner.

The Plan process continues to be the primary mechanism by which ACF will determine State and Territory compliance with requirements in the new law. The CCDBG Act of 2014 changed the Plan cycle from a biennial to a triennial Plan period; thus, this Plan will cover a 3-year period. (658E(b)) States and Territories are required to submit their FY 2016-2018 CCDF Plans by March 1, 2016, and approved Plans will become effective June 1, 2016. This Pre-Print will provide a tool for States and Territories to describe to ACF their implementation plans to:

1. Define CCDF Leadership and Coordination with Relevant Systems
2. Promote Family Engagement through Outreach and Consumer Education
3. Provide Stable Child Care Financial Assistance to Families

4. Ensure Equal Access to High Quality Child Care for Low-Income Children
5. Establish Standards and Monitoring Processes to Ensure the Health and Safety of Child Care Settings
6. Recruit and Retain a Qualified and Effective Child Care Workforce
7. Support Continuous Quality Improvement
8. Ensure Grantee Accountability

These organizational categories reflect key functions of an integrated system of high quality care for low-income working families. Although the Plan is divided into sections for reporting and accountability purposes, ACF encourages Lead Agencies to approach the Plan in a cross-cutting, integrated manner. The intention is that grantees and the federal government will be able to use this information to track and assess progress, determine need for technical assistance and CCDF Plan amendments, and ultimately determine compliance with specific requirements and deadlines.

For purposes of simplicity and clarity, the specific provisions printed herein of applicable laws are sometimes paraphrases of, or excerpts and incomplete quotations from, the full text. The State/Territory acknowledges its responsibility to adhere to them regardless of these modifications. The Plan contains definitions where provided by law. For terminology not defined in the law, some illustrative examples may be provided. These should only be considered examples, and not requirements, for purposes of responding. If no definitions are provided, States/Territories should respond based on their own definitions for those terms.

CCDBG Implementation Deadlines. In some cases, the CCDBG Act of 2014 specifies a particular date when a provision is effective. Where the law does not specify a date, the new requirements became effective upon the date of enactment and States/Territories have until September 30, 2016 to implement the new statutory requirement(s). ACF has determined that when a State or Territory cannot certify compliance with a specific requirement at the time of CCDF plan submission, the grantee must provide a State/Territory-specific implementation plan for achieving compliance with such provision(s). The implementation plan must provide sufficient information to support approval of the Plan for funding.

Specifically, as part of its implementation plan, States/Territories will be asked to describe:

- Overall target completion date (no later than appropriate effective date deadline)
- Unmet requirement(s) to complete – list the requirement(s) that are not fully complete or implemented
- Current status for any requirements not fully implemented (not yet started, in progress, partially completed, substantially completed, other)
- Specific steps (activities) you will take to complete the unmet requirement(s) (e.g., secure legislative or rule changes, modify agreements with coordinating agencies, etc.).
- Timeline for implementation including projected start date and end date for each step
- Agency/entity responsible for completion of the goal/objective, and partners who will work with the responsible agency to complete the goal/objective.

A comprehensive summary of the topical implementation plans across sections will be generated electronically to facilitate monitoring of progress towards completion.

ACF will work with States and Territories to monitor progress towards achievement of these requirements and will conduct reviews of implementation plans at least every six months. As part of the ongoing reviews, States and Territories will be asked to complete at least one update to the implementation plan through the e-submission site. Upon completion of the implementation plan, the State/Territory will submit a Plan amendment to certify fulfillment of the requirement(s). These updates and amendments can be submitted at any time prior to the effective date for the

requirement. For example, States and Territories may, and are encouraged to, submit amendments to certify compliance with requirements upon completion, but no later than the effective date of the requirements (refer to the Program Instruction on Effective Dates for these deadlines <https://www.acf.hhs.gov/programs/occ/resource/pi-2015-02> and corresponding timeline of effective dates <https://www.acf.hhs.gov/programs/occ/resource/pi-2015-02-attachment-timeline-of-effective-dates-for-States-and-Territories-ccdbg-act-of-2014>).

Lead Agencies can access a variety of federal technical assistance resources to support implementation of the new requirements at: <https://childcareta.acf.hhs.gov/ccdf-reauthorization> In addition to these materials, States and Territories will continue to receive support through the Office of Child Care's Technical Assistance Network (CCTAN) to assist with implementation of the new law. ACF recommends reviewing these resources prior to starting and completing each section of the Plan.

CCDF Plan Submission. States and Territories will submit their Plans electronically through the ACF-118 electronic submission site. The ACF-118 site will include all language and questions included in the final CCDF Plan Preprint template approved by the Office of Management and Budget. Please note that the format of the questions in the ACF-118 site may be modified from the Word version of the document to ensure compliance with Section 508 policies regarding accessibility to electronic and information technology for individuals with disabilities (see <http://www.section508.gov/> for more information). Until the final draft is approved, States and Territories may use the draft CCDF Plan preprint templates as they work to implement the new law. In responding to questions, States and Territories are asked to provide brief, specific summary text and/or bullet points only. Do not use tables or copy and paste charts, attachments or manuals into the Plan.

All information and materials developed to support CCDF implementation and information reported in the CCDF Plan are subject to review by ACF as part of ongoing monitoring efforts of CCDBG compliance. In cases where the CCDBG Act of 2014 did not change CCDF regulatory requirements (e.g., Public Hearing requirements), the CCDF regulations are still in effect and relevant questions are included in this Plan.

The CCDF Plan does not contain the Quality Performance Report (QPR) appendix included in previous Plans. The CCDBG Act of 2014 requires ongoing collection of some information that was included in the QPR. ACF will issue a separate information collection tool for public comment and approval linked to the CCDF Plan and updated based on the new requirements in the law.

1 Define CCDF Leadership and Coordination with Relevant Systems

Implementation of the requirements of the CCDBG Act of 2014 will require leadership and coordination between the child care assistance program and other child- and family-serving agencies, services, and supports at the state and local levels. ACF recognizes that each grantee must identify the most appropriate entities and individuals to lead and participate in implementation based on the context within that State or Territory. This will include those that manage various components of CCDF-funded activities and requirements (fiscal, subsidy, health and safety monitoring, and continuous quality improvement) as well as other public and private partners.

This section collects information to help ACF understand the stakeholders convened and consulted to develop the Plan, where authority lies to make policy decisions and program changes, and who is responsible for implementing the blueprint for action it describes. For example, the law requires that, at the option of the Tribes, State/Territory Lead Agencies must collaborate and coordinate with Indian tribes or tribal organizations in the State in a timely manner in the development of the CCDF Plan. ACF expects that new requirements in the law will necessitate that grantees build partnerships with other agencies and organizations to better link the children and families receiving financial assistance to

information, services and resources regarding other programs for which they may be eligible, including developmental screenings for children, and other resources (also in section 2). In addition, States and Territories must describe how public-private partnerships are being used to increase the supply and quality of child care services.

1.1 CCDF Leadership

The Governor of a State or Territory shall designate an agency (which may be an appropriate collaborative agency), or establish a joint inter-agency office, to represent the State (or Territory) as the Lead Agency. The Lead Agency agrees to administer the program in accordance with applicable Federal laws and regulations and the provisions of this Plan, including the assurances and certifications appended hereto. (658D, 658E(c)(1))

1.1.1 Which Lead Agency is designated to administer the CCDF program?

Identify the Lead Agency or joint inter-agency office designated by the State/Territory. ACF will send official grant correspondence such as grant awards, grant adjustments, Plan approvals, and disallowance notifications to the designated contact identified here. (658D(a))

Name of Lead Agency: Iowa Department of Human Services

Address of Lead Agency: Directors Office, Hoover Bldg. 5th Fl, 1305 E. Walnut, Des Moines, IA 50319

Name and Title of the Lead Agency Official Phone Number: Charles M. Palmer

E-Mail Address: cpalmer1@dhs.state.ia.us

Web Address for Lead Agency (if any): http://dhs.iowa.gov/

1.1.2 Who is the CCDF administrator?

Identify the CCDF administrator designated by the Lead Agency, the day-to-day contact, or the person with responsibility for administering the State/Territory's CCDF program. ACF will send programmatic communications such as program announcements, program instructions, and data collection instructions to the designated contact identified here. If there is more than one designated contact with equal or shared responsibility for administering the CCDF program, please identify the co-administrator or entity with administrative responsibilities and include contact information.

a) Contact Information for CCDF Administrator:

Name of CCDF Administrator: Chad Dahm, State Child Care Administrator, Bureau Chief, Bureau of Child Care

Title of CCDF Administrator: State Child Care Administrator, Bureau Chief, Bureau of Child Care

Address of CCDF Administrator: Div. of ACFS, Hoover Bldg. 5th Fl, 1305 E. Walnut, Des Moines, IA 50319

Phone Number: 515-281-6177

E-Mail Address: http://dhs.iowa.gov/

b) Contact Information for CCDF Co-Administrator (if applicable):

Name of CCDF Co-Administrator: _____

Title of CCDF Co-Administrator: _____

Phone Number: _____

E-Mail Address: _____

Description of the role of the Co-Administrator: _____

c) Primary Contact Information for the CCDF Program:

Phone Number for CCDF program information (for the public) (if any): 515-281-0429

Web Address for CCDF program (for the public) (if any): <http://dhs.iowa.gov/>

Web address for CCDF program policy manual: (if any):

<https://dhs.iowa.gov/sites/default/files/13-G.pdf>

Web address for CCDF program administrative rules: (if any):

<https://www.legis.iowa.gov/docs/ACO/chapter/441.170.pdf>

1.1.3 Identify the agency/department/entity that is responsible for each of the major parts of CCDF Administration and the lead contact responsible for managing this portion of the Plan.

- Outreach and Consumer Education (section 2):
 - Agency/Department/Entity Iowa Dept. of Human Services
 - Lead Contact Chad Dahm
- Subsidy/Financial Assistance (section 3 and section 4)
 - Agency/Department/Entity Iowa Dept. of Human Services
 - Lead Contact Chad Dahm
- Licensing/Monitoring (section 5):
 - Agency/Department/Entity Iowa Dept. of Human Services
 - Lead Contact Chad Dahm
- Child Care Workforce (section 6):
 - Agency/Department/Entity Iowa Dept. of Human Services
 - Lead Contact Chad Dahm
- Quality Improvement (section 7):
 - Agency/Department/Entity Iowa Dept. of Human Services
 - Lead Contact Chad Dahm
- Grantee Accountability/Program Integrity (section 8):
 - Agency/Department/Entity Iowa Dept. of Human Services
 - Lead Contact Chad Dahm

1.2 CCDF Policy Decision Authority

The Lead Agency has broad authority to administer (i.e., establish rules) and operate (i.e., implement activities) the CCDF program through other governmental, non-governmental, or other public or private local agencies as long as it retains overall responsibility for the administration of the program. (658D(b))

1.2.1 Which of the following CCDF program rules and policies are set or established at the State/Territory versus the local level? In other words, identify whether CCDF program rules and policies are established by the State or Territory (even if administered or operated locally) or whether the CCDF policies or rules are established by local entities (such as counties or workforce boards) setting those policies. Check one.

X ☐ All program rules and policies are set or established at the State/Territory level.

NA ☐ Some or all program rules and policies are set or established by local entities. If checked, indicate which entities establish the following policies. Check all that apply.

- ☐ Eligibility rules and policies (e.g., income limits) are set by the:
- ☐ State/Territory
 - ☐ County. If checked, describe the type of eligibility policies the county can set_____
 - ☐ Other local entity (e.g., workforce boards, early learning coalitions). If checked, identify the entity (e.g. workforce board) and describe the type of eligibility policies the local entity(ies) can set_____
 - ☐ Other. Describe: _____
- ☐ Sliding fee scale is set by the:
- ☐ State/Territory
 - ☐ County. If checked, describe the type of sliding fee scale policies the county can set_____
 - ☐ Other local entity (e.g., workforce boards, early learning coalitions). If checked, identify the entity (e.g. workforce board) and describe the type of sliding fee scale policies the local entity(ies) can set_____
 - ☐ Other. Describe: _____
- ☐ Payment rates are set by the:
- ☐ State/Territory
 - ☐ County. If checked, describe the type of payment rate policies the county can set_____
 - ☐ Other local entity (e.g., workforce boards, early learning coalitions). If checked, identify the entity (e.g. workforce board) and describe the type of payment rate policies the local entity(ies) can set_____
 - ☐ Other. Describe: _____
- ☐ Other. List and describe (e.g., quality improvement systems):

1.2.2 How is the CCDF program operated in your State/Territory? In other words, which agency(ies) implement or perform these CCDF services and activities and how will the State/Territory ensure that Federal CCDF requirements are fully implemented by other governmental or nongovernmental agencies. ACF recommends minimizing cross-state differences in eligibility or other policies to ease family burden and confusion. Check all that apply and describe the services performed by the entity and how the State/Territory ensures accountability that federal requirements are fully implemented by other agency(ies).

a) Who determines eligibility?

- X☐ CCDF Lead Agency
- ☐ TANF agency. Describe. _____
- ☐ Other State/Territory agency. Describe. _____
- ☐ Local government agencies such as county welfare or social services departments. Describe. _____
- ☐ Child care resource and referral agencies. Describe. _____
- ☐ Community-based organizations. Describe. _____

☐ Other. Describe. _____

b) Who assists parents in locating child care (consumer education)?

X ☐ CCDF Lead Agency

☐ TANF agency. Describe. _____

☐ Other State/Territory agency. Describe. _____

☐ Local government agencies such as county welfare or social services departments. Describe. _____

X ☐ Child care resource and referral agencies. Describe. _____

☐ Community-based organizations. Describe. _____

☐ Other. Describe. _____

c) Who issues payments?

X ☐ CCDF Lead Agency

☐ TANF agency. Describe. _____

☐ Other State/Territory agency. Describe. _____

☐ Local government agencies such as county welfare or social services departments. Describe. _____

☐ Child care resource and referral agencies. Describe. _____

☐ Community-based organizations. Describe. _____

☐ Other. Describe. _____

1.3 Consultation in the Development of the CCDF Plan

The Lead Agency is responsible for developing the CCDF plan which serves as the application for a three-year implementation period. In the development of the CCDF plan, the Lead Agency shall consult with appropriate representatives of units of general purpose local government.

(658D(b)(2)) General purpose local governments is defined by the U.S. Census at

https://www.census.gov/newsroom/cspan/govts/20120301_cspan_govts_def_3.pdf

The CCDBG Act of 2014 added a requirement that States consult with the State Advisory Council

on Early Childhood Education and Care (pursuant to 642B(b)(1)(A)(i) of the Head Start Act).

658E(c)(2)(R) In addition, States shall, at the option of an Indian tribe or tribal organization in the State, collaborate and coordinate with such Indian tribe or tribal organization in the development of the State plan in a timely manner. (658D (b)(1)(E))

- 1.3.1 Check who and describe how the Lead Agency consulted with these entities in the **development** of the CCDF Plan (check all that apply). For example, did the entity participate in a drafting committee, review drafts, sign off on the final version, or develop a memorandum of understanding with the Lead Agency to meet requirements to share information or services for CCDF subsidy families, or other manner of participation? This list includes entities required by law along with a list of optional CCDF Plan consultation partners that Lead Agencies potentially would consult with in their developing their CCDF Plan.

X [REQUIRED] Appropriate representatives of general purpose local government, which can include counties, municipalities or townships/towns

Describe: The Department participates on every-other-month meetings with a key advisory body to the Department, the State Child Care Advisory Committee, (SCCAC), formerly known as the State Child

Care Advisory Council. Now under the umbrella of Early Childhood Iowa (ECI), the SCCAC , which is co-chaired by non-DHS staff, is comprised of thirty-five statutorily-identified members from rural and urban areas across the state in addition to other interested parties. The Committee is required to have broad representation across early childhood and child care related fields, including from the following: for-profit and not-for-profit child care providers of early care and school-age care; parents of children receiving child care from licensed centers and from family or group child care homes; family, friend, and neighbor care, Iowa Afterschool Alliance; a provider of the state's voluntary preschool program for 4-year olds; child care resource and referral agencies; child advocacy groups; early childhood educators; a business owner or CEO submitted by the Iowa Chamber of Commerce; designees of the Departments of Human Services, Early Childhood Iowa, Public Health, Education, and Workforce Development; Head Start; a representative from the Early Childhood Iowa Stakeholder's Alliance; and 4 ex officio non-voting members of the legislature representing both the Iowa House and Senate. Active members cross the span of local human service and public health-related positions, as well as early childhood. Many of the members also serve on local Early Childhood Iowa boards, described below, which are predominately driven by local government entities and agencies.

The state plan primarily serves as a description of the state's subsidy and regulatory policies and practices and quality improvement efforts. The SCCAC provided input, in particular, regarding the biennium goals. In the FFY1213 plan, at least one of their recommendations was included in each goal area. Their input continues in this plan as well.

In addition, the Department participates on and receives input from the Early Childhood Iowa Stakeholder's Alliance whose purpose is to be a catalyst in the development of Iowa's comprehensive, early care, health, and education system. This group's strength is in the successful model and commitment that has been shown. Current membership includes both private and public sectors, including representatives of local government. Both government and non- governmental representatives partner to form that leadership. This group provides a comprehensive influence from wide-ranging early care, health and education partners at both the state and local government level. Many are representatives of the entities listed below.

- ☐ X [REQUIRED, IF APPLICABLE] State Advisory Council on Early Childhood Education and Care (pursuant to 642B(b)(1)(A)(i) of the Head Start Act). Describe ____
- ☐ If checked, does the Lead Agency have official representation and a decision-making role in the State Advisory Council?
 - ☒ X Yes
 - ☐ No.
 - ☐ If no State Advisory Council on Early Childhood Education and Care (pursuant to 642B(b)(1)(A)(i) of the Head Start Act) exists in your State/Territory, describe how you consulted with any other state- or state-designated cross-agency body such as an advisory council, cross-agency commission, or council or cabinet related to child and family planning and policy ____
- ☐ [REQUIRED, AT THE OPTION OF THE TRIBE] Indian tribe(s) and/or tribal organization(s). Describe, including which Tribe(s) you consulted with ____ Check N/A if no Indian Tribes and/or Tribal organizations in the State ☐

X State/Territory agency responsible for public education. Describe: Represented on SCCAC and ECI Stakeholders Alliance. In addition, bi-monthly planning meetings are held with Dept. of Education to address regulatory matters; the Lead Agency is represented on the state council overseeing the at-risk preschool programs

X State/Territory agency/agencies responsible for programs for children with special needs, including early intervention programs authorized under the Individuals with Disabilities Education Act (Part C for infants

and toddlers and Section 619 for preschool). Describe: Represented on SCCAC and ECI Stakeholders Alliance.

X State/Territory institutions for higher education, including community colleges. Describe: Represented on SCCAC and ECI Stakeholders Alliance.

X State/Territory agency responsible for child care licensing. Describe: NA - Lead Agency

X State/Territory office/director for Head Start State collaboration. Describe: Represented on SCCAC and ECI Stakeholders Alliance.

X State/Territory/local agencies with Early Head Start-Child Care Partnerships grants. Describe _____

X State/Territory agency responsible for Child and Adult Care Food Program (CACFP). Describe: The CACFP is under the state Dept of Education. Representation has been sought for the SCCAC and representation has been secured on the Oversight Team for the state's Quality Rating System.

X State/Territory agency responsible for WIC, nutrition (including breast-feeding support), and childhood obesity prevention. Describe Represented on SCCAC and ECI Stakeholders Alliance.

- ☐ Other Federal, State, local and/or private agencies providing early childhood and school-age/youth serving developmental services. Describe _____

X State/Territory agency responsible for implementing the Maternal and Child Home Visitation programs grant. Describe Represented on SCCAC and ECI Stakeholders Alliance.

- ☐ Agency responsible for Medicaid/Early and Periodic Screening, Diagnostic and Treatment (EPSDT). Describe _____
- ☐ McKinney-Vento State coordinators for Homeless Education. Describe _____

X State/Territory agency responsible for public health. Describe Represented on SCCAC and ECI Stakeholders Alliance.

X State/Territory agency responsible for child welfare. Describe Lead Agency

- ☐ State/Territory liaison for military child care programs. Describe _____

X State/Territory agency responsible for employment services/workforce development. Describe Lead Agency contracts with Iowa Workforce Development for PROMISE JOBS

X State/Territory agency responsible for Temporary Assistance for Needy Families (TANF). Describe Lead Agency

- ☐ State/community agencies serving refugee or immigrant families. Describe _____
- ☐ Child care resource and referral agencies. Describe _____
- ☐ Provider groups, associations, or labor organizations. Describe _____
- ☐ Parent groups or organizations. Describe _____
- ☐ Other. Describe _____

1.3.2 Describe the Statewide/Territory-wide public hearing process held to provide the public an opportunity to comment on the provision of child care services under this Plan (658D(b)(1)(C)). Lead Agencies are required to hold at least one public hearing in the State/Territory with sufficient State/Territory-wide distribution of notice prior to such hearing to provide the public an opportunity to comment on the provision of child care services under the CCDF Plan. At a minimum, this description must include: **TO BE COMPLETED PRIOR TO PLAN SUBMISSION**

- a) Date(s) of notice of public hearing: _____ Reminder - Must be at least 20 calendar days prior to the date of the public hearing.
- b) How was the public notified about the public hearing, including how notice was accessible for people with disabilities? _____

- c) Date(s) of public hearing(s): _____ **Reminder - Must be no earlier than September 1, 2015 (9 months before effective date of Plan - June 1, 2016).**
- d) Hearing site(s) or method(s), including how geographic regions of the State/Territory were addressed: _____
- e) Describe how the content of the Plan was made available to the public in advance of the public hearing(s): _____
- f) How will the information provided by the public be taken into consideration in the provision of child care services under this Plan? _____

1.3.3 Describe the strategies used by the Lead Agency to make the CCDF Plan and Plan Amendments available to the public. Check all that apply and describe.

- ☐ Sharing at public hearings. Describe _____
- ☐ Working with advisory committees. Describe _____
- ☐ Working with child care resource and referral agencies. Describe _____
- ☐ Providing translation in other languages. Describe _____
- ☐ Making available on the Lead Agency website. List the website _____
- ☐ Sharing through social media (Twitter, Facebook, Instagram, email, etc.). Describe _____
- ☐ Providing notification to stakeholders (e.g., provider groups, parent groups). Describe _____
- ☐ Other. Describe _____

1.4 Coordination with Partners to Expand Accessibility and Continuity of Care

The CCDBG Act of 2014 added a requirement that the Plan describe how the State/Territory will efficiently, and to the extent practicable, coordinate child care services supported by CCDF with programs operating at the Federal, State/Territory, and local levels for children in the programs listed below.

1.4.1 Check **who and describe how** your State/Territory **coordinates** or plans to efficiently coordinate child care services with the following programs to expand accessibility and continuity of care, and assist children enrolled in early childhood programs to receive full-day services. (658E(c)(2)(O)) Please **describe the goals of this coordination**, such as extending the day or year of services for families; smoothing transitions for children between programs or as they age into school, enhancing and aligning quality of services, linking comprehensive services to children in child care settings or developing supply of quality care for vulnerable populations. This list includes entities required by law along with a list of optional CCDF Plan coordination partners that Lead Agencies potentially would coordinate with to expand accessibility and continuity of care, and assist children enrolled in early childhood programs to receive full-day services. Check and describe all that apply.

X [REQUIRED] Programs operating at the Federal, State and local levels for children in pre-school programs (e.g., state-funded pre-k, Head Start, school-based programs, public and private preschools, programs serving preschool children receiving special education services, etc.). Describe _____

GOAL:

X [REQUIRED, IF APPLICABLE] Tribal early childhood programs. Describe, including which Tribes coordinating with _____

GOAL:

☐ Check N/A if no Tribes or Tribal programs exist within the boundaries of the State.

X [REQUIRED] Other Federal, State, local early childhood programs serving infants and toddlers with disabilities. Describe _____

GOAL:

X [REQUIRED] Early childhood programs serving homeless children (as defined by the McKinney Vento Act). Describe _____

GOAL:

X [REQUIRED] Early childhood programs serving children in foster care. Describe _____

GOAL:

☐ State/Territory agency responsible for licensing. Describe Lead Agency

X State/Territory agency with Head Start State collaboration grant. Describe _____

GOAL:

X State Advisory Council authorized by the Head Start Act. Describe _____

GOAL:

X State/Territory/local agencies with Early Head Start-Child Care Partnerships grants. Describe _____

GOAL:

☐ McKinney-Vento State coordinators for Homeless Education or local educational agency McKinney-Vento liaisons. Describe _____

X Child care resource and referral agencies. Describe _____

GOAL:

X State/Territory agency responsible for public education. Describe _____

GOAL:

X State/Territory institutions for higher education, including community colleges. Describe _____

GOAL:

X State/Territory agency responsible for Child and Adult Care Food Program (CACFP). Describe _____

GOAL:

☐ State/Territory agency responsible for WIC, nutrition (including breast-feeding support), and childhood obesity prevention. Describe _____

X State/Territory agency responsible for implementing the Maternal and Childhood Home Visitation programs grant. Describe _____

GOAL:

☐ Agency responsible for Medicaid/Early and Periodic Screening, Diagnostic and Treatment (EPSDT). Describe Lead Agency

X State/Territory agency responsible for public health. Describe _____

GOAL:

- ☐ State/Territory agency responsible for child welfare. Describe Lead Agency
- ☐ State/Territory liaison for military child care programs. Describe _____

X State/Territory agency responsible for employment services/workforce development. Describe _____

GOAL:

- ☐ State/Territory agency responsible for Temporary Assistance for Needy Families (TANF). Describe Lead Agency
- ☐ State//Territory community agencies serving refugee or immigrant families. Describe _____
- ☐ Provider groups, associations, or labor organizations. Describe _____
- ☐ Parent groups or organizations. Describe _____
- ☐ Other. Describe _____

1.5 Optional Use of Combined Funds

The CCDBG Act of 2014 added a provision that States and Territories have the option to combine funding for CCDF child care services with funding for any of the required programs listed in 1.4.1. These include programs operating at the Federal, State and local levels for children in preschool programs, tribal early childhood programs, and other early childhood programs, including those serving infants and toddlers with disabilities, homeless children, and children in foster care. (658E(c)(2)(O))(ii) Combining funds could include blending multiple funding streams, pooling funds, or layering funds together from multiple funding streams in an effort to expand and/or enhance services for children and families to allow for delivery of comprehensive high quality care that meets the needs of children and families. For example, State/Territory agencies may use multiple funding sources to offer grants or contracts to programs to deliver services; a State/Territory may allow county/local government to use coordinated funding streams; or policies may be in place that allow local programs to layer funding sources to pay for full-day, full-year child care that meets Early Head Start/Head Start or State/Territory pre-kindergarten requirements in addition to State/Territory child care licensing requirements. As a reminder, per the OMB Compliance Supplement governing audits (https://www.whitehouse.gov/omb/circulars/a133_compliance_supplement_2014), CCDF funds may be used in collaborative efforts with Head Start (CFDA 93.600) programs to provide comprehensive child care and development services for children who are eligible for both programs. In fact, the coordination and collaboration between Head Start and the CCDF is mandated by sections 640(g)(2)(D) and (E), and 642(c) of the Head Start Act (42 USC 9835(g)(2)(D) and (E); 42 USC 9837(c)) in the provision of full working day, full calendar year comprehensive services (42 USC 9835(a)(5)(v)). In order to implement such collaborative programs, which share, for example, space, equipment or materials, grantees may blend several funding streams so that seamless services are provided.

1.5.1 Will you combine CCDF funds with the funds for any program with which you coordinate (described in 1.4.1)?

- ☐ Yes. If yes, describe at a minimum:
 - How do you define “combine”: _____
 - Which funds will you combine _____
 - Goal(s) of combining funds (why?) and expected outcomes, such as extending the day or year of services available (i.e., full-day, full-year programming for working families), smoothing transitions for children, enhancing and aligning quality of services, linking comprehensive services to children in child care or developing the supply of child care for vulnerable populations _____

- Method of fund allocation (how you will be combining multiple sets of funding, such as at the State/Territory level, local level, program level?) _____
- How are the funds tracked and method of oversight _____

☐ No

1.6 Public-Private Partnerships

The CCDBG Act of 2014 adds a new provision that requires States and Territories to describe in the Plan how the State/Territory encourages partnerships among State/Territory and public agencies, tribal organizations, private entities, faith based organizations and/or community-based organizations to leverage existing service delivery systems for child care and development services and to increase the supply and quality of child care services for children through age 12, such as by implementing voluntary shared services alliance models (i.e., cooperative agreement among providers to pool resources to pay for shared fixed costs and operation). (658E(c)(2)(P)) ACF expects these types of partnerships to leverage public and private resources to further the goals of reauthorization.

- 1.6.1 **Describe the entities with whom** and the levels at which the State/Territory is partnering (level – State/Territory, county/local, and/or programs), **the goals** of the partnerships, **method of** partnering. Include in your description examples of activities that have resulted from partnerships with other State/Territory and public agencies, tribal organizations, private entities, faith based organizations or community-based organizations, and how the partnerships are expected to leverage existing service delivery systems for child care and development services and to increase the supply and quality of child care services. _____

Partnership on cliff effect with UW?

FCF - Since 2003, Iowa has partnered with First Children's Finance (FCF) - to work on facilitating public/private partnerships to improve the sustainability of quality child care programs – at both the state and local level. Initially, this effort centered on providing training and technical assistance to programs, but has since grown into the Iowa Growth Fund. The Growth Fund is a targeted effort involving child care center programs that are participants in Iowa's Quality Rating System (QRS). They must demonstrate the need for technical assistance in the area of business improvement, board involvement and the desire and ability to change the way they do business, including substantial fundraising and soliciting local business investment. FCF provides up to \$5,000 per program to assist them with implementing a business plan developed with the assistance of FCF and a team of Growth Fund Advisors (which includes business and early childhood leaders from the local community). In addition, programs are provided with group training around specific issues identified by the programs and their advisors. Programs have been able to successfully develop and implement fund raising and marketing plans, as well as learning how to better engage their boards as partners in improving the quality of their programs and expanding access for families.

In the partnership described above, the expected results would be 1) increased viability and sustainability by high quality providers 2) supporting continuity of care for young children, and 3) increased investment by the private sector.

1.7 Coordination with Local or Regional Child Care Resource and Referral Systems

States and Territories may use funds to establish or support a system of local or regional child care resource and referral organizations that is coordinated, to the extent determined by the

State/Territory, by a statewide public or private non-profit, community-based or regionally based, lead child care resource and referral organization (also see section 7.4). If they do, the law identifies specific requirements for that entity or system receiving CCDF funds. (658E(c)(3)(B)(iii)) These include:

- Provide families with information on a full range of child care options (including faith-based, community-based, nontraditional hours and emergency child care centers) in their local area or region
- To the extent practicable, work directly with families who receive child care assistance to offer the families support and assistance in making an informed decision about child care options in an effort to ensure families are enrolling their children in the most appropriate child care setting to suit their needs and that is of high quality as determined by the State/Territory
- Collect data and provide information on the coordination of services and supports, including services provided through the Individuals with Disabilities Education Act for children with disabilities
- Collect data and provide information on the supply of and demand for child care services in local areas or regions of the State/Territory and submit such information to the State/Territory
- Work to establish partnerships with public agencies and private entities, including faith-based and community-based child care providers, to increase the supply and quality of child care services in the State/Territory
- As appropriate, coordinate their activities with the activities of the Lead Agency and/or local agencies that administer CCDF.

1.7.1 Does the State/Territory fund a system of local or regional CCR&R organizations?

- No. The State/Territory does not fund a CCR&R system and has no plans to establish.

X Yes. The State/Territory funds a CCR&R system. See also related follow-up questions in Section 7.1 and 7.4. If yes,

- ☐ Describe the State/Territory's written agreement or contract with the CCR&R and what services are provided through the CCR&R as a result. _____

1.8 Disaster Preparedness and Response Plan

The CCDBG Act of 2014 added a requirement that States and Territories must include a *Statewide Child Care Disaster Plan* for coordination of activities with the State/Territory human services agency, emergency management agency, child care licensing agency, State/Territory local resource and referral agencies, and the State Advisory Council or other state-designated cross-agency body if no SAC. (658E(c)(2)(U)) The Statewide Child Care Disaster Plan must include:

- Guidelines for continuing CCDF assistance and child care services after a disaster, which may include provision of temporary child care, and temporary operating standards for child care after a disaster.
- Requirements that child care providers have in place procedures for evacuation, relocation, shelter-in-place, lock-down, communication and reunification with families, continuity of operations, accommodation of infants and toddlers, children with disabilities, and children with chronic medical conditions.
- Requirements that child care providers have in place procedures for staff and volunteer emergency preparedness training and practice drills.

1.8.1 Describe the status of State/Territory's Statewide Child Care Disaster Plan.

- ☐ Fully implemented and meeting all Federal requirements outlined above. If applicable, describe additional ways the State/Territory addresses the needs of children receiving CCDF before, during and after a disaster or emergency, not already incorporated into the Statewide Child Care Disaster Plan _____

X Not implemented. The State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses here will be consolidated electronically into an Implementation Plan summary report.

- Overall Target Completion Date (no later than September 30, 2016) _____
- Unmet Requirement(s) – Identify the requirement(s) that is not fully complete or implemented _____
- Current Status – Describe the State/Territory's status toward completion for any requirement(s) not fully implemented (not yet started, in progress, partially completed, substantially completed, other) _____
- Tasks/Activities – What specific steps will you take to complete the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) _____
 - Projected start date for each activity _____
 - Projected end date for each activity _____
 - Agency – Who is responsible for completion of this activity _____
 - Partners – Who is the responsible agency partnering with the State/Territory lead agency to complete this activity _____

2 Promote Family Engagement through Outreach and Consumer Education

Parents are their children's most important teacher and advocate. State and Territory child care systems interact with parents in multiple ways, therefore presenting many opportunities to engage and inform families. Child care providers can serve as convenient and trusted sources of information for parents and family members on child development and community supports and services. State/Territory and local child care assistance systems should be designed to promote seamless linkages to useful information and other child- and family-services, such as during subsidy intake and redetermination processes and when parents utilize child care resource and referral or QRIS agencies.

The CCDBG Act of 2014 includes key purposes that address the role of parents as child care consumers who need information to make informed choices regarding the services that best suit their needs. A new purpose of CCDBG is to "promote involvement by parents and family members in the development of their children in child care settings." States and Territories have the opportunity to consider how information can be provided to parents through the child care assistance system, partner agencies, and child care sites that will support their role as their children's teacher and advocate. Key new provisions include:

1. The plan must certify that States and Territories will collect and disseminate consumer and provider education information to CCDF parents, providers, and the general public, including information about:
 - a) the availability of child care assistance,
 - b) the quality of child care providers (if available),

- c) Other programs (specifically Temporary Assistance for Needy Families (TANF), Head Start and Early Head Start, Low-Income Home Energy Assistance Program (LIHEAP), Supplemental Nutrition Assistance Program (SNAP), Women, Infants and Children (WIC) program, Child and Adult Care Food Program (CACFP), Medicaid and State Children's Health Insurance Program (SCHIP)) for which families may also qualify.
 - d) Individuals with Disabilities Education Act (IDEA) programs and services,
 - e) Research and best practices in child development, and
 - f) State/Territory policies regarding social- and emotional-development, including preschool expulsion policies for children 0-5.
2. Information related to the health and safety of children in child care settings. The plan must certify that the State/Territory will make public certain information about the results of health and safety monitoring (described in section 5) using a website that is consumer-friendly and in an easily accessible format, including:
- a) Provider-specific information: 1) results of monitoring and inspection reports, including those due to major substantiated complaints; 2) last date of inspection; and 3) information on corrective actions taken (if applicable).
 - b) Aggregate annual information about: 1) the annual number of deaths; 2) the annual number of serious injuries; and 3) annual number of incidences of substantiated child abuse.
 - c) State/Territory processes for: 1) licensing child care providers; 2) conducting background checks and the offenses that would keep a provider from being allowed to care for children; and 3) conducting monitoring and inspections of child care providers.

2.1 Information about Child Care Financial Assistance Program Availability and Application Process

Lead Agencies must inform parents of eligible children and the general public of the process by which they can apply for and potentially receive child care assistance services. (658E(c)(2)(E)(i)(1))

2.1.1 Describe how the State/Territory informs families of availability of services.

- a) How does the State/Territory identify populations and areas of potentially eligible families (e.g., using available federal, State/Territory and local needs assessments to identify potentially eligible families?) _____
- b) What partners help with outreach? For example, child care resource and referral agencies, home visitors, pediatricians, faith-based services, State/Territory or local agencies and organizations or other familiar and safe access points serving vulnerable or low-income populations. _____
- c) What outreach strategies does the Lead Agency use (e.g., media campaigns, State/Territory website, or other electronic outreach? Lead Agency website, CCR&R, ongoing communication with stakeholders/ECI

2.1.2 How can parents apply for services? Check all that apply.

☒ Electronically via online application, mobile app or email. Provide link <https://ccmis.dhs.state.ia.us/MainPortal/>

☐ In-person interview or orientation. Describe agencies where these may occur _____

☒ Phone

☒ Mail

- ☐ At the child care site
- ☐ At a child care resource and referral agency
- ☐ Through kiosks or online portals at related State/Territory/local agency or organization serving low-income populations. Describe _____

- ☐ Through a coordinated application process (e.g., application is linked to other benefits program to allow parents to apply for several programs at one time). Describe _____
- ☐ Other strategies. Describe _____

2.2 Consumer and Provider Education Information

The CCDBG Act of 2014 added a purpose of the child care program “to promote involvement by parents and family members in the development of their children in child care settings.” (658A(b)(3)) The consumer education requirements address multiple topics that parents and family members need in order to make informed choices and act as their most important teacher and advocate. Lead agencies must certify that they will collect and disseminate the following information through resource and referral agencies or other means. (658E(c)(2)(E))

2.2.1 The State/Territory certifies that it collects and disseminates the following information to parents, providers and the general public:

- Information about the availability of the full diversity of child care services that will promote informed child care choices,
- Availability of child care assistance,
- Quality of child care providers (if available),
- Other programs (specifically Temporary Assistance for Needy Families (TANF), Head Start and Early Head Start, Low-Income Home Energy Assistance Program (LIHEAP), Supplemental Nutrition Assistance Program (SNAP), Women, Infants and Children (WIC) program, Child and Adult Care Food Program (CACFP), Medicaid and State Children’s Health Insurance Program (SCHIP) for which families may also qualify.
- Individuals with Disabilities Education Act (IDEA) programs and services,
- Research and best practices in child development, including social and emotional development, early childhood development, meaningful parent and family engagement, and physical health and development (particularly healthy eating and physical activity), and
- State/Territory policies regarding the social-emotional behavioral health of young children, which may include positive behavioral intervention and support models, and policies on expulsion of preschool-aged children, in early childhood programs receiving child care assistance (CCDF).

☐ x Yes. The State/Territory certifies that it collects and disseminates the above information to parents, providers and the general public. Describe using 2.2.2 through 2.2.8 below.

☐ No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

- Overall Target Completion Date (no later than September 30, 2016) _____
- Unmet Requirement(s) – Identify the requirement(s) that is not fully complete or implemented _____
- Current Status – Describe the State/Territory’s status toward completion for any requirement(s) not fully implemented (not yet started, in progress, partially completed, substantially completed, other) _____

- Tasks/Activities – What specific steps will you take to complete the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) _____
 - Projected start date for each activity _____
 - Projected end date for each activity _____
 - Agency – Who is responsible for completion of this activity _____
 - Partners – Who is the responsible agency partnering with to complete this activity _____

2.2.2 Describe how the State/Territory makes information about the availability of the full diversity of child care services that will promote informed child care choices, including consumer-friendly strategies such as materials that are culturally responsive and in multiple languages as needed, reflect the literacy levels of consumers, and are easy to locate

- a) Describe how the State/Territory makes information about the full diversity of child care services available to parents of eligible children, providers and the general public _____
- b) Describe what you provide and how (i.e., methods such as written materials, direct communication, etc.) _____
- c) Describe who you partner with to make information about the full diversity of child care choices available _____

2.2.3 Describe how the State/Territory makes information about the quality (such as through a quality rating and improvement system, if available, nationally-recognized accreditation, or other means) of child care services available to the public, including consumer-friendly strategies such as messages that are designed to engage intended audiences and are easy to understand

- a) Describe how the State/Territory makes information about child care quality available to parents of eligible children, providers and the general public _____
- b) Describe what you provide and how (i.e., methods such as written materials, direct communication, etc.) _____
- c) Describe who you partner with to make information about child care quality available _____

2.2.4 Describe how the State/Territory shares information with eligible parents about other available human service programs. For example, does the State/Territory share information about these other programs through linkages from the online application, universal applications, through intake process/front line workers, providers, child care resource and referral agencies or other trusted advisors such as home visitors, pediatricians, faith-based services, etc.? At a minimum, include in your description how you provide information to eligible parents, what you provide and by what methods, and which partners you work with to provide information about other available service programs.

- a) Temporary Assistance for Needy Families (TANF) _____
- b) Head Start and Early Head Start Programs _____
- c) Low Income Home Energy Assistance Program (LIHEAP) _____
- d) Supplemental Nutrition Assistance Programs (SNAP- formerly known as Food Stamps) _____
- e) Women, Infants, and Children Program (WIC) _____
- f) Child and Adult Care Food Program(CACFP) _____
- g) Medicaid _____
- h) Children's Health Insurance Program (CHIP) _____
- i) Individuals with Disabilities Education Act (IDEA) _____

j) Other State/Federally Funded Child Care Programs (e.g., state pre-kindergarten) _____

2.2.5 Describe how the State/Territory shares information with providers (where applicable) to link families to these other available human service programs. For example, does the State/Territory provide information to providers through CCR&R outreach, as a condition of their contract or voucher agreement, through community-based hub agencies that partner with subsidy providers, county/local collaboration, through quality rating and improvements systems, etc.?

a) Temporary Assistance for Needy Families (TANF) _____

b) Head Start and Early Head Start Programs _____

c) Low Income Home Energy Assistance Program (LIHEAP) _____

d) Supplemental Nutrition Assistance Programs (SNAP- formerly known as Food Stamps) _____

e) Women, Infants, and Children Program (WIC) _____

f) Child and Adult Care Food Program(CACFP) _____

g) Medicaid _____

h) Children's Health Insurance Program (CHIP) _____

i) Individuals with Disabilities Education Act (IDEA) _____

j) Other State/Federally Funded Child Care Programs (example-State Pre-K) _____

2.2.6 Describe how the State/Territory makes available information to parents of eligible children, the general public, and where applicable, providers (see also section 6) about research and best practices in child development, including social and emotional development, early childhood development, meaningful parent and family engagement, and physical health and development (particularly healthy eating and physical activity). (658E(c)(2)(E)(VI))

a) Describe how the State/Territory makes information about research and best practices in child development available to parents of eligible children, providers and the general public _____

b) Describe what you provide and how (i.e., methods such as written materials, direct communication, etc.) _____

c) Describe who you partner with to make information about research and best practices in child development available _____

2.2.7 Describe the State/Territory's policy regarding the social-emotional behavioral health of young children, which may include positive behavioral intervention and support models, and policies on expulsion of preschool-aged children (from birth to five), in early childhood programs receiving child care assistance. (658E(c)(2)(E)(i)(VII)) _____

a) Does the State have a written policy regarding preventing expulsion of

☐ Preschool children (from birth to five) in early childhood programs receiving child care assistance?

☐ Yes. If yes, describe and provide a link _____

☐ No.

☐ School-age children from programs receiving child care assistance

☐ Yes. If yes, describe and provide a link _____

☐ No.

b) Describe how the State/Territory makes information regarding social-emotional behavioral health of young children available to parents of eligible children, providers and the general public _____

c) Describe what you provide and how (i.e., methods such as written materials, direct communication, etc.) _____

d) Describe who you partner with to make information regarding social-emotional behavioral health of young children available _____

2.2.8 Coordination with Other Partners to Increase Access to Developmental Screenings

The State/Territory must develop and describe procedures for providing information on and referring families to existing developmental screening services. (658E(c)(2)E(ii)) At a minimum, the State/Territory must establish procedures to provide information to families and child care providers on: Early and Periodic Screening, Diagnosis, and Treatment program under the Medicaid program carried out under Title XIX of the Social Security Act (42 U.S.C. 1396 et seq.) and developmental screening services available under section 619 and part C of the Individuals with Disabilities Education Act (20 U.S.C. 1419, 1431 et seq.). Describe the status of the State/Territory's procedures for providing information on and referring families to existing developmental screening services.

☐ Fully implemented and meeting all Federal requirements outlined above. List the Lead Agency policy citation(s) and describe procedures, including timelines for when infants, toddlers and preschoolers should be screened: _____

☒ **X Not implemented.** If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

- Overall Target Completion Date (no later than September 30, 2016) _____
- Unmet Requirement(s) – Identify the requirement(s) that is not fully complete or implemented _____
- Current Status – Describe the State/Territory's status toward completion for any requirement(s) not fully implemented (not yet started, in progress, partially completed, substantially completed, other) _____
- Tasks/Activities – What specific steps will you take to complete the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) _____
 - Projected start date for each activity _____
 - Projected end date for each activity _____
 - Agency – Who is responsible for completion of this activity _____
 - Partners – Who is the responsible agency partnering with to complete this activity _____

2.2.9 Describe how the State/Territory meets the requirement to maintain a record of substantiated parental complaints. (658E(c)(2)(C))

a) How does the State/Territory define substantiated parental complaint

We do not have a formal definition of “substantiated” parental complaint. However, if a complaint is considered to be substantiated, this means that there has been non-compliance with regulations has been found.

b) How does the State/Territory maintain a record of substantiated parental complaints about providers (e.g., how long are records maintained and in what format)

We do not have specific record of ONLY parental complaints. For licensed child care centers, the most recent licensing visit report is available for review on line via the KinderTrack system. In addition, a record of all complaints and licensing violations are kept in the licensing file and are available to the public upon request. The identity of the complainant is not disclosed unless the complainant has waived anonymity. Furthermore, child abuse assessment information is not considered a part of the public file.

For registered child development homes, a record of all complaints and regulatory violations are kept in the regulatory file at the local Department of Human Services office and in the centralized Child Care Assistance and Regulatory Unit in Des Moines.

c) How does the State/Territory make substantiated parental complaints available to the public on request

The licensing file can be accessed by the public by contacting the child care consultant assigned to the center. For that purpose, the name, address and phone number of the consultant is conspicuously posted at each center.

The regulatory file for child development homes is available to the public upon request, except that the identity of the complainant is not disclosed unless the complainant has waived anonymity. Furthermore, child abuse assessment information is not considered a part of the public file.

At this time, we are working to get the most recent monitoring visit reports uploaded to our public website for all providers. If a report is unavailable, there is a standardized note indicating how to obtain the information.

Iowa is also working to get most current complaint reports uploaded to the website for public viewing. At this time, we are working to build a new system that will allow greater ease in managing those reports being uploaded.

d) Describe how the State/Territory defines and maintains complaints from others about providers

There is no difference in how complaints are handled in relation to who reports them. The identity of the complainant is not disclosed unless the complainant has waived anonymity.

2.2.10 How will the Lead Agency or partners provide outreach and services to eligible families with limited English proficiency?

Check the strategies, if any, that your State/Territory has chosen to implement.

- ☒ X Application in other languages (application document, brochures, provider notices)
- ☒ X Informational materials in non-English languages
- ☐ Training and technical assistance in non-English languages
- ☐ Website in non-English languages
- ☐ Lead Agency accepts applications at local community-based locations
- ☒ X Bilingual caseworkers or translators available
- ☐ Bilingual Outreach Workers
- ☐ Partnerships with community-based organizations
- ☐ Other: _____
- ☐ None

2.2.11 If the Lead Agency checked any option above related to providing information or services in other non-English languages, please list the primary languages offered (top 3) or specify that the State/Territory has the ability to have translation/interpretation in all primary and secondary language: Spanish

2.3 Website for Consumer Education

The CCDBG Act of 2014 added a requirement that States and Territories have a website describing processes for licensing and monitoring child care providers, processes for conducting criminal background checks, and offenses that prevent individuals from being child care providers, and aggregate information on the number of deaths, serious injuries and child abuse.

The State/Territory must make public certain information about the results of such monitoring on a website in a way that is consumer-friendly and in an easily accessible format. (658E(c)(2)(D)) In order for a website to be a useful tool for parents, it should be easy to navigate, with a minimum number of clicks, and in plain language. States and Territories must post the results of the monitoring on the website no later than November 19, 2017. All other components of the website must be completed no later than September 30, 2016.

2.3.1 Describe the status of State/Territory's consumer education website.

By March of 2016, PDF's will be posted on child care page of DHS website that contain easy-to-read, non-bureaucratic descriptions of the items identified below. Information on number of deaths and injuries will be as currently reported in the Quality Performance Report in December of each year. Work will continue on an injury surveillance or reporting system.

- ☒ X Fully implemented and meeting all Federal requirements outlined above. Provide the link to the website [redacted] and describe how the consumer education website meets the requirements to:
 - a) Share provider-specific information about health and safety, licensing or regulatory requirements met by the provider (including the last date of inspection, and any history of violations) [redacted]
 - b) Include a description of health and safety requirements and licensing or regulatory requirements for child care providers [redacted]

- c) Include a description of the processes for licensing, background checks, monitoring, and offenses that prevent individuals from being providers _____
 - d) Provide annual aggregate information about the **number of deaths, number of serious injuries** as defined by the State/Territory and the number of incidences of substantiated child abuse in child care settings _____
 - e) Describe how the website is consumer-friendly, for example, allowing multiple ways to search for providers, defining terms such as exempt care and corrective action plans, providing frequently asked questions, differentiating between violations based on risk to children, and easy to locate and navigate _____
- ☐ Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date. Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.
- Overall Target Completion Date (no later than September 30, 2016 for all components of the website except posting the results of the monitoring on the website which is November 19, 2017) _____
 - Unmet Requirement(s) – Identify the requirement(s) that is not fully complete or implemented _____
 - Current Status – Describe the State/Territory’s status toward completion for any requirement(s) not fully implemented (not yet started, in progress, partially completed, substantially completed, other) _____
 - Tasks/Activities – What specific steps will you take to complete the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) _____
 - Projected start date for each activity _____
 - Projected end date for each activity _____
 - Agency – Who is responsible for completion of this activity _____
 - Partners – Who is the responsible agency partnering with to complete this activity _____

3 Provide Stable Child Care Financial Assistance to Families

The expanded purposes of CCDBG highlight the opportunities States and Territories have to “deliver high-quality, coordinated early childhood care and education services to maximize parents’ options and support parents trying to achieve independence from public assistance”; and “to improve child care and development of participating children.” (658A(b)) Young children learn in the context of their relationships with adults, including their child care teacher or provider. The unintentional consequence of child care assistance that is linked to adult work and school obligation is that child care arrangements – and the opportunity for children to form trusting relationships with teachers – are often interrupted and unstable. Child care financial assistance policies that make it easier to get and keep assistance support continuity of care and relationships between the child and child care provider and enable parents to stay employed or complete training/education. Child care support that extends until families are able to pay the full cost of care themselves promotes longer lasting economic stability for families. CCDF funds may support families until they reach 85% of State Median Income (SMI).

The CCDBG Act of 2014 included requirements to establish 12-month eligibility and redetermination periods, requiring that States and Territories have a process to account for irregular fluctuations in earnings, a policy ensuring that families' work schedules are not disrupted by program requirements, policies to provide for job search of not less than three (3) months, and to describe policies for graduated phase-out of assistance. The definition of an eligible child includes that a family's assets may not exceed \$1,000,000 (as certified by a member of such family). Procedures for enrollment of homeless children pending completion of documentation are also now required.

3.1 Eligible Children and Families

At the point in time when eligibility is determined, children must (1) be under the age of 13, (2) reside with a family whose income does not exceed 85 percent of the State's median income for a family of the same size, and whose family assets do not exceed \$1,000,000 (**as certified by a member of such family**); and who (3)(a) resides with a parent or parents who are working or attending a job training or educational program; or (b) is receiving, or needs to receive, protective services and resides with a parent or parents not described in (3a.). (658P(4))

3.1.1 Eligibility Criteria Based upon Child's Age

a) The CCDF program serves children from 1 week (weeks/months/years) to 13 years (through age 12).

b) Does the Lead Agency allow CCDF-funded child care for children age 13 and above but below age 19 years who are physically and/or mentally incapable of self-care? (658E(c)(3)(B)), 658P(3))

☐ X Yes, and the upper age is up to age 19 (may not equal or exceed age 19). Provide the Lead Agency definition of physical or mental incapacity:

A child with one or more of the following conditions:

- The child has been diagnosed by a physician or by a person endorsed for service as a school psychologist by the Iowa Department of Education to have a developmental disability which substantially limits one or more major life activities, and the child requires professional treatment, assistance in self care, of the purchase of special adaptive equipment.
- The child has been determined by a qualified intellectual disabilities professional to have a condition which impairs the child's intellectual and social functioning.
- The child has been diagnosed by a mental health professional to have a behavioral or emotional disorder characterized by situationally-inappropriate behavior which deviates substantially from behavior appropriate to the child's age, or which significantly interferes with the child's intellectual, social, or personal adjustment.

☐ No.

c) Does the Lead Agency allow CCDF-funded child care for children age 13 and above but below age 19 years who are under court supervision? (658P(3), 658E(c)(3)(B))

☐ Yes, and the upper age is _____ (may not equal or exceed age 19)

☒ X No.

3.1.2 How does the Lead Agency define the following eligibility terms?

residing with –

- Legal spouses (including common law) who reside in the same household
- Natural, adoptive, or stepmother or father, and children who reside in the same household
- A child who resides with a person or persons not legally responsible for the child's support;

- A companion in the home is not considered in determining family size or income unless there is a common child.

The composition of the family does not change when one or more of the family members is temporarily absent from the household. Persons who meet the definition of temporary absence are considered when determining family size.

Temporarily absent means:

- A medical absence anticipated to be less than three months.
- An absence for the purpose of education or employment
 - a) • Absence of a family member who intends to return home within three months

in loco parentis means:

An adult standing in place of the parent; custody/guardianship is not required to be formalized through the court if the individual is a relative.

3.1.3 Eligibility Criteria Based on Reason for Care

- a) How does the Lead Agency define “working” for the purposes of eligibility at the point of determination? Provide a brief description below, including allowable activities and if a minimum number of hours is required by State/Territory (not a federal requirement).

working means:

a. employed for 28 or more hours per week, or employed an average of 28 or more hours per week during the month or employed **and** participating in academic or vocational training for 28 or more hours per week or an average of 28 or more hours per week in the aggregate, during the month.

b. looking for employment. Child care services for job search is limited to only those hours the parent is looking for employment, including travel time, for a maximum of 30 consecutive working days in a 12 month period.

c. service as a volunteer in the AmeriCorps or AmeriCorps*Vista program for a minimum of 28 hours per week or an average of 28 or more hours per week during the month.

d. Child care services may be provided for the hours of employment of a single parent or the coinciding hours of employment or training/education or job search or volunteer service in the AmeriCorps or AmeriCorps*Vista program of both parents in a two-parent home and for the actual travel time between the child care facility and place of employment.

e. If the state is affected by federal or state declared emergencies, the Lead Agency may determine, for a specific geographic region(s), that a parent(s) who otherwise has met the eligibility condition for need for service as stated in paragraphs a-d above and who were certified at the time the emergency was declared, may be determined to continue to meet that condition of eligibility if the declared emergency and ensuing recovery temporarily prevent the parent from meeting the requirement. In such instances, the Lead Agency will establish timeframes for the exclusion to apply. The timeframes established will be developed within the context of the establishment of the federal or state declared emergencies and relevant

timeframes related to assistance that might be available under those emergencies. The timeframes for the exclusion to apply will be an established period of time relevant to the affected policy (i.e., suspension of a required six-month review, etc.)

f. Parent(s) who otherwise met the eligibility condition for need for service as stated in paragraphs a-d above who become temporarily medically incapacitated as verified by a physician may be determined to continue to meet that condition of eligibility for a limited period of time. The timeframe for the exclusion to apply will be established based on medical documentation from the parent's physician.

- b) Does the Lead Agency provide CCDF child care assistance to parents who are attending job training or an educational program?

☐ X Yes. If yes, how does the Lead Agency define "attending job training or educational program" for the purposes of eligibility at the point of determination? Provide a brief description below.

- attending job training or educational program:
 - Formally enrolled full-time, as defined by the institution, in an approved educational or vocational training program. Part-time plans may be approved only if the number of credit hours to complete training is less than full-time status, the required prerequisite credits or remedial coursework is less than full-time status, or training is not offered on a full-time basis. For FIP recipients participating in PROMISE JOBS, part-time plans may be approved as above. In addition, PROMISE JOBS participants may use part-time training when family circumstances indicate this is necessary. In all instances where part-time training is used, PROMISE JOBS participants must be able to complete the training within maximum participation limits as established by Iowa Administrative Code Chapter 93.
 - employed **and** participating in academic or vocational training for 28 or more hours per week or an average of 28 or more hours per week in the aggregate, during the month.
- *Job training and educational program* is defined as:
 - a. Academic or vocational training must culminate in a specific goal, such as high school completion, improved English skills, or the development of specific academic or vocational skills
 - b. Training may be approved for high school completion activities, adult basic education, GED, English as a second language, a college program which leads to an associate of arts degree, and a postsecondary education, up to and including a baccalaureate degree program.
 - c. Child care provided while the parent participates in postsecondary education or vocational training is limited to a 24-month lifetime limit. A month is defined as a fiscal month and generally has starting and ending

dates falling with two adjacent calendar months but only count as one month. Time spent in high school education, GED, or English as a second language does not count toward the 24month limit.

d. Child care services may be provided for the hours of participation in postsecondary education or vocational training of a single parent or the coinciding hours of employment or training/education or job search or volunteer service in the AmeriCorps or AmeriCorps*Vista program of both parents in a two- parent home and for the actual travel time between, the child care facility and place of employment.

e. If the state is affected by federal or state declared emergencies, the Lead Agency may determine, for a specific geographic region(s), that a parent(s) who otherwise has met the eligibility condition for need for service as specified in paragraphs “a-d” above and who were certified at the time the emergency was declared, may be determined to continue to meet the condition of eligibility if the declared emergency and ensuing recovery prevent the parent from temporarily meeting the requirement. In such instances, the Lead Agency will establish timeframes for the exclusion to apply. The timeframes established will be developed within the context of the establishment of the federal or state declared emergencies and relevant timeframes related to assistance that might be available under those emergencies. The timeframes for the exclusion to apply will be an established period of time relevant to the affected policy (i.e., suspension of a required six-month review, etc.)

f. Parent(s) who otherwise met the eligibility condition for need for service as stated in paragraphs a-d above who become temporarily medically incapacitated as verified by a physician may be determined to continue to meet that condition of eligibility for a limited period of time. The timeframe for the exclusion to apply will be established based on medical documentation from the parent’s physician.

☐ No.

- c) Does the Lead Agency allow parents to qualify for CCDF assistance on the basis of education and training participation alone (without additional minimum work requirements)?

☐ X Yes. If yes, describe requirements: Formally enrolled full-time, as defined by the institution, in an approved educational or vocational training program

☐ No.

- d) Does the Lead Agency provide child care to children in protective services?

☐ X Yes. If yes, how does the Lead Agency define “protective services” for the purposes of eligibility? Provide a brief description below.

1) Definition of protective services – _____

Child care provided as part of a safety plan during a child abuse assessment or as part of the service plan established in a family's case file. The child must have an open child abuse assessment; an open child welfare case as a result of a child abuse assessment, or adjudication as a child in need of assistance. Respite care is not provided to custodial parents of children being served under protective child care.

2) Does the Lead Agency waive the co-payment and income eligibility requirements for cases in which children receive, or need to receive, protective services on a case-by-case basis? (658E(c)(5))

☒ X Yes.

☐ No.

Note – If the Lead Agency elects to provide CCDF-funded child care to children in foster care whose foster care parents are *not* working, or who are *not* in education/training activities for CCDF purposes these children are considered to be *in protective services* and should be included in this definition.

3.1.4 Eligibility Criteria Based on Family Income

a) How does the Lead Agency define “income” for the purposes of eligibility at the point of determination? Provide the Lead Agency’s definition of “income” for purposes of eligibility determination.

- Definition of income:

The non-exempt monthly gross income of any person included in the family size is used in determining the family’s income. The monthly gross income is the monthly sum of income received by a person from the following sources that are identified by the U.S. Census Bureau in computing the median income:

- Alimony
- Casino Profits
- Child support
- Dividends, interest on savings or bonds, income from estates or trusts, net rental income or royalties
- Money, wages or salary
- Net rental income or royalties
- Net income from farm self-employment
- Net income from non-farm self-employment
- Pensions and annuities
- Public assistance or welfare payments
- Social Security
- Strike pay
- Supplemental Security Income
- Permanent Disability Insurance (SSDI)
- Railroad Retirement Insurance
- Unemployment compensation
- Workers compensation
- Veterans benefits
- Work Study
- Cash Payments
- Volunteer Service Organizations (i.e., VISTA, AmeriCorps)

b) Provide the CCDF income eligibility limits in the table below. **Complete** columns (a) and (b) based upon maximum eligibility initial entry into the CCDF program. Complete columns (c) and (d) **ONLY IF** the Lead Agency is using income eligibility limits lower than 85% of the current SMI. Complete columns (e) and (f) with the maximum “exit” eligibility level if applicable and below the federal limit of 85% of current SMI.

Family Size	(a) 100% of State Median Income (SMI) (\$/month)	(b) 85% of State Median Income (SMI) (\$/month) [Multiply (a) by 0.85]	(c) (IF APPLICABLE) \$/month Maximum “Entry” Income Level if lower than 85% Current SMI	(d) (IF APPLICABLE) % of SMI [Divide (c) by (a), multiply by 100] Income Level if lower than 85% Current SMI	(e) (IF APPLICABLE) \$/month Maximum “Exit” Income Level if lower than 85% Current SMI	(f) (IF APPLICABLE) % of SMI [Divide (f) by (a), multiply by 100] Income Level if lower than 85% Current SMI
1	3335	2835	1423	43		
2	4361	3707	1925	44		
3	5387	4579	2428	45		
4	6413	5451	2931	46		
5	7439	6323	3433	46		

Reminder - Income limits must be provided in terms of current State Median Income (SMI) (or Territory Median Income) even if federal poverty level is used in implementing the program. Federal poverty guidelines are available at <http://aspe.hhs.gov/poverty/index.cfm>.

c) SMI Source US Census Bureau - 2104

d) These eligibility limits in column (c) became or will become effective on: 7/1/15 for “entry level”.
7/1/15 proposed for “exit level”

3.1.5 Graduated Phase-Out of Assistance

The CCDBG Act of 2014 added a provision that requires States and Territories to provide for a graduated phase-out of *assistance for families whose income has increased at the time of re-determination*, but remains below the federal threshold of 85% of State median income. Pending additional guidance from ACF, this could be achieved through policies such as establishing a second income eligibility threshold at re-determination (e.g., establishing a different entry and exit level income eligibility threshold) or by granting a sustained period of continued assistance to the family before termination. Providing a graduated phase-out supports long-term family economic stability by allowing for wage growth and a tapered transition out of the child care subsidy program. (658E (c)(2)(N)(iv))

Describe the status of the State/Territory’s policy regarding graduated phase-out of assistance.

- ☐ **X Fully implemented** and meeting all Federal requirements outlined above. List the Lead Agency’s policy citation(s) and **describe the policies and procedures for graduated phase-out**: _____
- ☐ Not implemented. The State must provide a State-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste tables here. Your responses here will be consolidated electronically into an Implementation Plan summary report.

- Overall Target Completion Date (no later than September 30, 2016) _____

- Status – Describe the State’s status toward completion (such as not yet started, in progress, partially completed, substantially completed, other) _____
- Unmet Requirement(s) – Identify the requirement(s) that you plan to complete _____
- Tasks/Activities – What steps will you take to complete the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

 - Projected start date for each activity _____
 - Projected end date for each activity _____
 - Agency – Who is responsible for completion of this activity _____
 - Partners – Who is the responsible agency partnering with to complete this activity _____

3.1.6 Fluctuation in Earnings

The CCDBG Act of 2014 added a requirement that the Plan shall demonstrate how the State/Territory’s (or designated local entity) processes for initial determination and redetermination take into account irregular fluctuations in earnings. (658E(c)(2)(N)(i)(II))

Note – this change requires that States and Territories have policies to account for the fact that some parents with seasonal or other types of work schedules may have irregular earnings over the course of a year, including changes that temporarily exceed 85% of SMI. States and Territories should have procedures to guide how eligibility and copayments are set in a manner to take such circumstances into account. For example, averaging family income over a period of time to broaden the scope of income verification to be more reflective of annual income rather than tied to a limited time frame that may have seasonal irregularities.

Describe the status of the State/Territory’s policy related to the fluctuation in earnings requirement.

X Fully implemented and meeting all Federal requirements outlined above. List the Lead Agency’s policy citation(s) and provide the State’s definition of a “temporary” change pursuant to this requirement: Iowa’s income determination policy is flexible enough to account for fluctuations in income. Iowa’s policy requires that the department use a method of projecting that is most indicative of future income. Iowa accounts for minor variations by allowing for averaging income over a period of time, not to exceed 6 months.

The department projects income by using only the amount that can be reasonably anticipated. This means that we do not use income that is temporarily high, for instance unusual overtime or bonus income. In addition the department counts only the amount that is certain when income varies greatly. For example, if a family receives at least \$100 per month in child support but occasionally receives \$250 per month, the department would only use \$100 to project future income.

In addition, to accommodate periods of unemployment due to season nature of work, Iowa allows continued eligibility for a a job search for one 30-day period every 12 months

- ☐ Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and

descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

- Overall Target Completion Date (no later than September 30, 2016) _____
- Unmet Requirement(s) – Identify the requirement(s) that is not fully complete or implemented _____
- Current Status – Describe the State/Territory’s status toward completion for any requirement(s) not fully implemented (not yet started, in progress, partially completed, substantially completed, other) _____
- Tasks/Activities – What specific steps will you take to complete the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) _____
 - Projected start date for each activity _____
 - Projected end date for each activity _____
 - Agency – Who is responsible for completion of this activity _____
 - Partners – Who is the responsible agency partnering with to complete this activity _____

3.1.7 Describe how the Lead Agency documents, verifies and maintains applicant information. Check the information that the Lead Agency documents. There are no federal requirements for specific documentation or verification procedures.

- ☒ X Applicant identity. Describe Documented by household on application
- ☒ X Applicant’s relationship to the child. Describe Documented by household on application
- ☒ X Child’s information for determining eligibility (e.g., identity, age, etc.). Describe Documented by household on application
- ☒ X Work, Job Training or Educational Program. Describe Class schedules from school and work schedules from parent
- ☒ X Family Income. Describe Check stubs or employer statements
- ☒ X Household composition. Describe Documented by household on application
- ☒ Applicant residence. Describe Documented by household on application
- ☐ Other. Describe _____

Reminder – Lead Agencies are reminded that, for purposes of implementing the citizenship verification requirements mandated by title IV of Personal Responsibility and Work Opportunity Reconciliation Act, *only the citizenship and immigration status of the child*, who is the primary beneficiary of the child care benefit, is relevant for eligibility purposes (ACYF-PI-CC-98-08). States may not deny child care benefits to an eligible child because the parent(s), legal guardians, persons standing in loco parentis, or other household members have not provided information regarding their immigration status. In addition, verification of child citizen status is not required when the child is served in a program meeting Early Head Start/Head Start standards, such as in Early Head Start – Child Care Partnerships (<http://www.acf.hhs.gov/programs/occ/resource/pi-2008-01>).

3.1.8 Which strategies, if any, will the Lead Agency use to assure the timeliness of eligibility determinations upon receipt of applications?

- ☐ X Time limit for making eligibility determinations. Describe length of time 30 DAYS
- ☐ X Track and monitor the eligibility determination process
- ☐ Other. Describe _____

☐ None

3.1.9 Informing parents who receive TANF benefits about the exception to the individual penalties associated with the TANF work requirement

Per CCDF regulations, Lead Agencies are required to inform parents who receive TANF benefits about the exception to the individual penalties associated with the work requirement for any single custodial parent who has a demonstrated inability to obtain needed child care for a child under 6 years of age (98.16(9) and 98.33(b)). This requirement did not change under the reauthorization. Lead Agencies must coordinate with TANF programs to ensure, pursuant that TANF families with young children will be informed of their right not to be sanctioned if they meet the criteria set forth by the State/Territory TANF agency in accordance with section 407(e)(2) of the Social Security Act.

In fulfilling this requirement, the following criteria or definitions are applied by the TANF agency to determine whether the parent has a demonstrated inability to obtain needed child care. **NOTE:** The TANF agency, not the CCDF Lead Agency, is responsible for establishing the following criteria or definitions. These criteria or definitions are offered in this Plan as a matter of public record.

a) Identify the TANF agency that established these criteria or definitions:

State/Territory TANF Agency Iowa Dept of Human Services

b) Provide the following definitions established by the TANF agency.

"appropriate child care": means that the child care provider is a licensed center, a registered development home, an exempt facility, or someone who has an approved review or evaluation of child abuse and criminal record checks and can meet the minimum health and safety requirements for nonregistered child care home providers.

•

"reasonable distance": means that the required travel time from home to the work-related and does not exceed one hour each way including the travel time necessary to take a child to a child care provider.

•

"unsuitability of informal child care": means a child care center who has not completed the licensing process or a nonregistered child care provider who cannot be approved upon evaluation of a child abuse or criminal record checks or who cannot meet the minimum health and safety requirements for nonregistered child care home providers.

•

"affordable child care arrangements": means that child care for approved PROMISE JOB components is provided at no cost.

•

c) How are parents who receive TANF benefits informed about the exception to individual penalties associated with the TANF work requirements?

☐ X In writing

☐ X Verbally

☐ Other: _____

3.1.10 The Lead Agency certifies that it will require a family member to certify that the family assets do not exceed \$1,000,000. A check-off on the application is sufficient.

- ☐ X Yes. The Lead Agency certifies that it will require families to certify that the family assets do not exceed \$1,000,000 no later than September 30, 2016. PER MARK - ADD TO APP& REVIEW FORM

3.2 Increasing Access for Vulnerable Children and Families

At a minimum, CCDF requires Lead Agencies to give priority for child care assistance to children with special needs, or in families with very low incomes. This did not change under reauthorization. Prioritization of CCDF assistance services is not limited to eligibility determination (i.e., establishment of a waiting list or ranking of eligible families in priority order to be served). Lead Agencies may fulfill priority requirements in other ways such as higher payment rates for providers caring for children with special needs or waiving co-payments for families with very low incomes (at or below the federal poverty level). (658E(c)(3)(B))

3.2.1 Describe how the Lead Agency will prioritize or target child care services for the following children and families (658E(c)(3)(B)), including definitions, any time limits, grace periods or priority rules in the description:

Provide definition of "Children with special needs" A child with one or more of the following conditions: The child has been diagnosed by a physician or by a person endorsed for service as a school psychologist by the Iowa Department of Education to have a developmental disability which substantially limits one or more major life activities, and the child requires professional treatment, assistance in self care, or the purchase of special adaptive equipment. The child has been determined by a qualified intellectual disabilities professional to have a condition which impairs the child's intellectual and social functioning. The child has been diagnosed by a mental health professional to have a behavioral or emotional disorder characterized by situationally-inappropriate behavior which deviates substantially from behavior appropriate to the child's age, or which significantly interferes with the child's intellectual, social, or personal adjustment.

- a. and describe how services are prioritized: Higher eligibility level – 200% FPL and higher rate of reimbursement if documentation submitted by provider that justifies additional needs for care. Families with children with special needs included in priority group for service during times of waiting list.

Provide definition of “Families with very low incomes” Children in families with an income of more than 100 percent but not more than 145 percent of the federal poverty level whose members are employed at least 28 hours per week. Additionally, families with an income at or below 200 percent of the federal poverty level whose members are employed at least 28 hours per week or are participating in an approved training or education program and who have a special needs child as a member of the family.

- b. and describe how services are prioritized Co-pays are waived for families below 100% FPL and they are exempt from waiting list criteria if under 100% FPL and on FIP.
- c. Describe how services for families receiving Temporary Assistance for Needy Families (TANF), those attempting to transition off TANF through work activities, and those at risk of becoming dependent on TANF are prioritized (Section 418(b)(2) of the Social Security Act) Priority for service in time of waiting list, waive co-pay if under 100% FPL and coordination with other agencies (PROMISE JOBS). In times of insufficient funding, and based upon the availability of funding appropriated for the CCA program, the Lead Agency must establish waiting lists in descending order of prioritization as follows:

a. Families with an income at or below one hundred percent of the federal poverty level whose members, for at least twenty-eight hours per week in the aggregate, are employed or are participating at a satisfactory level in an approved training program or educational program, and parents with a family income at or below one hundred percent of the federal poverty level who are under the age of twenty-one years and are participating in an educational program leading to a high school diploma or the equivalent.

b. Parents with a family income at or below one hundred percent of the federal poverty level who are under the age of twenty-one years and are participating, at a satisfactory level, in an approved training program or in an educational program.

c. Families with an income of more than one hundred percent but not more than one hundred forty-five percent of the federal poverty level whose members, for at least twenty-eight hours per week in the aggregate, are employed or are participating at a satisfactory level in an approved training program or educational program.

d. Families with an income at or below two hundred percent of the federal poverty level whose members are employed at least twenty-eight hours per week with a special needs child as a member of the family. 8. Nothing in this section

3.2.2 Improving Access for Homeless Children and Families.

The CCDBG Act of 2014 places greater emphasis on serving homeless children and families. Stable access to high-quality child care provides tremendous benefits to all children, especially our most vulnerable children. Children and families who experience homelessness face many challenges. Improving access to child care can buffer children and families from the challenges and risks associated with homelessness by supporting children’s learning and development in safe, stable and nurturing environments. Under the new law, States and Territories are required to use CCDF funds to 1) allow homeless children to receive CCDF assistance after an initial eligibility determination but before providing required documentation (including documentation related to immunizations); 2) providing training and technical assistance to child care providers on identifying and serving homeless children and families (addressed in Section 6); and 3) conduct specific outreach to homeless families. (658E(c)(3))

States and Territories also must establish a grace period that allows homeless children and children in foster care (if served by the Lead Agency) to receive CCDF assistance while their families are taking the necessary actions to comply with immunization and other health and safety requirements as described in Section 5. This flexibility will significantly make it easier for these vulnerable families to access child care services. This language is consistent with current requirements

established through CCDF regulations in 1998, which required a grace period in which children can receive services while families take the necessary actions to comply with the immunization requirements. (658E(c)(2)(I)(i)(I)) ACF recommends States and Territories consult the definition of homeless in the McKinney-Vento Act (section 725 of subtitle VII-B) as you implement the requirements of this section.

Describe the status of the State/Territory's establishment procedures to enroll and provide outreach to homeless families and establish a grace period for children in foster care, if served, for meeting immunization requirements

- ☐ Fully implemented and meeting all Federal requirements outlined above. Describe the following:
- a. Procedures to expedite enrollment for homeless children and families, including the grace period to comply with immunization and health and safety requirements _____
 - b. Procedures to conduct outreach to homeless families to improve access to child care services _____
 - c. Procedures to provide a grace period to comply with immunization and other health and safety requirements to expedite enrollment for children who are in foster care if served by the Lead Agency to improve access to child care services _____
- ☐ **Not implemented.** If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.
- Overall Target Completion Date (no later than September 30, 2016) _____
 - Unmet Requirement(s) – Identify the requirement(s) that is not fully complete or implemented _____
 - Current Status – Describe the State/Territory's status toward completion for any requirement(s) not fully implemented (not yet started, in progress, partially completed, substantially completed, other) _____
 - Tasks/Activities – What specific steps will you take to complete the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) _____
 - Projected start date for each activity _____
 - Projected end date for each activity _____
 - Agency – Who is responsible for completion of this activity _____
 - Partners – Who is the responsible agency partnering with to complete this activity _____

3.3 Protection for Working Parents

3.3.1 Twelve-Month Eligibility

The CCDBG Act of 2014 establishes 12-month eligibility and redetermination periods for CCDF families. States and Territories are required to demonstrate in the Plan that no later than September 30, 2016 each child who receives assistance will be considered to meet all eligibility requirements for such assistance and will receive such assistance, for not less than 12 months before the State/Territory redetermines the eligibility of the child, regardless of changes in income (as long as income does not exceed the federal threshold of 85% of State median income) or temporary changes in participation in work, training, or education activities. (658E(c)(2)(N)(i) & (ii))

Note that this change means a State/Territory may not terminate CCDF assistance during the 12-month period if a family has an increase in income that exceeds the State's income eligibility threshold, but not the federal threshold of 85% SMI.

In addition, this change means the State/Territory may not terminate assistance prior to the end of the 12-month period if family experiences a temporary job loss or temporary change in participation in a training or education activity. Examples of temporary changes include but are not limited to: absence from employment due to maternity or extended medical leave,

changes in seasonal work schedule, or if a parent enrolled in training or educational program is temporarily not attending class between semesters.

Describe the status of the State/Territory's establishment of 12-month eligibility and redetermination periods for CCDF families.

- ☐ X Fully implemented and meeting all Federal requirements outlined above. List the Lead Agency's policy citation(s) and describe: Lead Agency plans to implement a 12 month eligibility period effective 7/1/16. Rules process and policy citations will be initiated by February 2016.
- ☐ Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.
- Overall Target Completion Date (no later than September 30, 2016) _____
 - Unmet Requirement(s) – Identify the requirement(s) that is not fully complete or implemented _____
 - Current Status – Describe the State/Territory's status toward completion for any requirement(s) not fully implemented (not yet started, in progress, partially completed, substantially completed, other) _____
 - Tasks/Activities – What specific steps will you take to complete the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) _____
 - Projected start date for each activity _____
 - Projected end date for each activity _____
 - Agency – Who is responsible for completion of this activity _____
 - Partners – Who is the responsible agency partnering with to complete this activity _____

3.3.2 State and Territory option to terminate assistance prior to 12 months

The CCDBG Act of 2014 provides States and Territories the option – but does not require them – to terminate assistance prior to re-determination at 12 months if a parent loses employment or if he or she stops attending a job training or education program (i.e., if the parent experiences a non-temporary change in their status as working, or participating in a training or education program). However, prior to terminating the subsidy, the State/Territory must provide a period of continued child care assistance of at least 3 months to allow parents to engage in job search, resume work, or to attend an education or training program as soon as possible. (658E(c)(2)(N)(iii))

Note that unless the State allows a minimum 3-month job search period – the State/Territory may not exercise the option to terminate assistance based on a parent's non-temporary job loss or cessation of attendance at a job training or educational program prior to the end of the 12 month eligibility and re-determination period.

Does the State/Territory terminate assistance prior to 12 months due to a parent's loss of work or cessation of attendance at a job training or education program?

- ☐ No, the State/Territory does not allow this option.
- ☐ X Yes, the State/Territory allows this option. List the Lead Agency's policy citation(s) and provide the period of time and circumstances allowed: LIST POLICY CITATION FOR CURRENT 30 DAY JOB SEARCH. In addition, the Lead Agency Lead Agency plans to implement a 3 month job search for families who experience a non-temporary change in need for service effective 7/1/16. Rules process and policy citations will be initiated by February 2016.
- ☐

3.3.3 Prevent Disruption of Work

The CCDBG Act of 2014 added a requirement that States and Territories must describe in the Plan the procedures and policies in place to ensure that parents (especially parents in families receiving assistance under TANF) are not required to unduly disrupt their employment, education or job training activities in order to comply with the State/Territory's or designated local entity's requirements for redetermination of eligibility for assistance. (658E(c)(2)(N)(ii)) Examples include implementing re-determination strategies to verify income and employment electronically as opposed to more onerous practices such as asking parents and families to come to the subsidy office for an in-person visit, or aligning eligibility with other early care and education programs to collect information centrally. The process by which States and Territories collect eligibility documentation represents a potential barrier to services, particularly when documentation can only be provided in-person during standard work hours. States and Territories can offer a variety of family-friendly mechanisms for submitting documentation for eligibility determinations and/or re-determination.

Describe the status of the State/Territory's redetermination procedures and policies to ensure that parents (especially parents receiving TANF) do not have their employment, education or job training unduly disrupted in order to comply with the State/Territory's or designated local entity's requirements for redetermination of eligibility.

X Fully implemented and meeting all Federal requirements outlined above. List the Lead Agency's policy citation(s) and describe the policies and procedures for not unduly disrupting employment:

Iowa allows for temporary periods of job search. Iowa has also expanded definitions of work and training that allow for temporary periods of incapacity. This means a family can retain CCA eligibility and receive payment for services when a parent is temporarily unable to work, attend training or care for their children due to a medical incapacity.(See below also.)

Iowa's income determination policy is flexible enough to account for fluctuations in income. Iowa's policy requires that the department use a method of projecting that is most indicative of future income. Iowa accounts for minor variations by allowing for averaging income over a period of time, not to exceed 6 months.

The department projects income by using only the amount that can be reasonably anticipated. This means that we do not use income that is temporarily high, for instance unusual overtime or bonus income. In addition the department counts only the amount that is certain when income varies greatly. For example, if a family receives at least \$100 per month in child support but occasionally receives \$250 per month, the department would only use \$100 to project future income.

In addition, Iowa excludes lump sum inheritances/insurance payments/settlements as well as tax refunds.

Iowa has expanded definitions of work and training that allow for temporary periods of incapacity. This means a family can retain CCA eligibility and receive payment for services when a parent is temporarily unable to work, attend training or care for their children due to a medical incapacity.

Iowa CCA allows family members, including children, to be temporarily absent for up to 3 months. Although services are not paid, the family retains its CCA eligibility even though the child is out of the home.

Iowa allows for payment of 4 absent days per month.

Reduction of administrative denials/cancellations:

In 2010 Iowa implemented a grace period to allow families to return information after cancellation or denial and have eligibility re-determined without needing to file a new application. The Department recognized that many families cancelled for not returning information are actually eligible for services. Grace period policy allows families to establish or reestablish eligibility without having to file a additional paperwork.

Generic release:

The Department attaches a generic release to its applications that, if signed by the family, allows the Department to obtain information from 3rd parties when needed.

Longer timeframe for returning review forms:

Review forms are mailed to families 45 days prior to the end of the cert to allow ample time to return the form and required documentation. Providers are notified of the upcoming review date at the same time.

No interview:

Families are not required to attend an interview (in-person or by phone) to establish eligibility. Interviews are conducted only when necessary to clarify confusing information.

The department has various acceptable methods of accepting documentation that allow for submission outside of normal business hours. (Fax, mail, email, online, dropbox)

Iowa has a statewide program that is administered from a central location. Families do not have to reapply when they move from one area to another and there are no disruptions in service.

The Department notifies both families and providers of the eligibility period when a family is approved and again 45 days prior to the end of the family's certification period.

The Department's CCA workers can obtain information collected for other programs through access to the Electronic Case File system. CCA workers also have access to case narration for the other programs through the Online Narrative system. This streamlines information collection when another program has already requested and received information needed by the CCA worker.

- ☐ Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.
- Overall Target Completion Date (no later than September 30, 2016) _____
 - Unmet Requirement(s) – Identify the requirement(s) that is not fully complete or implemented _____
 - Current Status – Describe the State/Territory's status toward completion for any requirement(s) not fully implemented (not yet started, in progress, partially completed, substantially completed, other) _____
 - Tasks/Activities – What specific steps will you take to complete the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) _____
 - Projected start date for each activity _____
 - Projected end date for each activity _____
 - Agency – Who is responsible for completion of this activity _____

- Partners – Who is the responsible agency partnering with to complete this activity _____

3.4 Family Contribution to Payment

The statute requires Lead Agencies to establish a sliding fee scale that varies based on income and the size of the family to be used in determining each family's contribution (i.e., co-payment) to the cost of child care that is not a barrier to families receiving CCDF. (658E(c)(5) In addition to income and size of the family, the Lead Agency may use other factors when determining family contributions/co-payments. The sliding fee scale is subject to review by ACF as part of ongoing monitoring efforts to CCDBG compliance.

- 3.4.1 Provide the CCDF copayments in the chart below according to family size. Note – If the sliding fee scale is not statewide, fill in the chart based on the most populous area of the State. Check here to indicate the sliding fee scale is not statewide. ☐ Describe how many jurisdictions set their own copay: None

Family Size	(a) Maximum "Entry" Income Level	(b) What is the monthly copayment for a family of this size upon initial entry into CCDF?	(c) What is the percent of income for (b) ?
1	1423	\$151.80 (max)	10.7%
2	1925	\$162.80 (max)	8.5%
3	2428	\$173.80 (max)	7.2%
4	2931	\$173.80 (max)	5.9%
5	3433	\$173.80 (max)	5.1%

- a. What is the effective date of the sliding fee scale(s)? 7/1/15

- 3.4.2 How will the family's contribution be calculated and to whom will it be applied? Check all that apply.

- ☐ Fee is a dollar amount and
- ☐ Fee is per child with the same fee for each child
 - ☐ Fee is per child and discounted fee for two or more children
 - ☐ Fee is per child up to a maximum per family
 - ☐ No additional fee charged after certain number of children
 - ☐ Fee is per family
- ☐ Fee is a percent of income and
- ☐ Fee is per child with the same percentage applied for each child
 - ☐ Fee is per child and discounted percentage applied for two or more children
 - ☐ Fee is per child up to a maximum per family
 - ☐ No additional percentage applied charged after certain number of children
 - ☐ Fee is per family
 - ☐ Contribution schedule varies because it is set locally/regionally (as indicated in 1.2.1). Describe:

☒ X Other. Describe As part of the eligibility determination process the department determines if the family is responsible for a co-payment. The Department does not assess a co-payment fee to families at or below 100% of the federal poverty guidelines, families with a child with protective needs where

services are provided without regard to income and recipients of FIP and participants in approved PROMISE JOBS activities as they are below the federal poverty guidelines.

Fees are assessed by determining the gross monthly income according to family size and the number of children in care. When more than one child in a family is receiving child care services, the family's contribution, or fee, is based on the youngest child in the family who receives the most care (the most units of service). An additional fee for each child is not assessed. The family fee is assigned to the youngest child and is a set dollar amount per unit of care provided to that child.

The family is notified of the co-payment fee on the Notice of Decision issued by the Department. The provider is responsible for collecting the co-payment fee directly from the CCA eligible family

3.4.3 Will the Lead Agency use other factors in addition to income and family size to determine each family's copayment?
(658E(c)(3)(B))

- ☐ Yes, and describe those additional factors using the checkboxes below.
- ☐ Number of hours the child is in care
- ☐ Lower copayments for higher quality of care as defined by the State/Territory
- ☐ X Other. Describe other factors. The Iowa Department of Human Services does not require a fee assessment for:

- Families at or below 100% of the federal poverty which includes recipients of FIP and participants in approved PROMISE JOBS activities.
- Families with a child with protective needs, on a case-by-case basis, where services are provided without regard to income. The child must be a member of a family where child care is needed as part of a safety plan during a child abuse assessment or as part of the service plan established in a family's case file. The child must have an open child abuse assessment; an open child welfare case as a result of a child abuse assessment, or adjudication as a child in need of assistance. When more than one child in a family is receiving child care services, the fee is based on the child who receives the most care (the most units of service). An additional fee for each child is not assessed.

☐ X No.

3.4.4 The Lead Agency may waive contributions/co-payments from families whose incomes are at or below the poverty level for a family of the same size (98.42(c)). Will the Lead Agency waive family contributions/co-payments for families whose incomes are at or below the poverty level?

- ☒ X Yes, the Lead Agency waives family contributions/co-payments for families with income at or below the poverty level for families of the same size. The poverty level used by the Lead Agency for a family size of 3 is: \$1,675
- ☐ No, the Lead Agency does not waive family contributions/co-payments.

3.4.5 How will the Lead Agency ensure the family contribution/co-payment, based on a sliding fee scale, is affordable and not a barrier to families receiving CCDF? Check all that apply.

- ☐ Limits the maximum co-payment per family. Describe: _____
- ☐ Limits combined amount of copayment for all children to 10% or less of family income. Describe: _____
- ☒ X Minimizes the abrupt termination of assistance before a family can afford the full cost of care ("the cliff effect") as part of the graduated phase-out of assistance discussed in 3.1.5. Describe: Implementing an "exit" eligibility level of 85% SMI - planned to be implemented 7/1/16.
- ☐ X Does not allow providers to charge families the difference between the maximum reimbursement rate and their private pay rate. Describe _____
- ☐ Covers all fees (such as registration, supplies, field trips) to minimize the additional fees charged to the families by the provider. Describe: _____
- ☒ X Other. Describe: Fees are charged to clients eligible under the Child Care Assistance program's criteria, but not to those at or below 100% FPL, those participating in PROMISE JOBS program components or those families receiving services without regard to income due to a protective service situation.

The sliding fee schedule is applied based on the number of persons in the family, the income of that family, and how many children are in care. The state determines the number of persons in the family (which is the same number of persons used when determining income eligibility for service). The state determines the number of persons in the family, the monthly family income, and how many children are in care.

When more than one child is attending a child care program, there is no additional fee. The fee is based on the child who receives the most care.

The fees charged to families for child care (basic care) range from \$0.00 to \$3.95 per half-day unit (i.e., up to 5 hours of care). The maximum half-day fee is \$6.95 if the child has a special need.

The monthly income chart and sliding fee schedule for child care services are applied regardless of the services being provided by a licensed child care center, an exempt facility, a registered child development home, a nonregistered child care home, or in-home care.

The CCDF regulations suggest that co-payments that are no more than 10% of a family's income would be a litmus test for "affordability." Other studies have suggested 7% should be a target for co-pays for families of all incomes. Based on Iowa's eligibility:

For a family of 4 just over 100% FPL, the co-payment for a month would equate to .4%-1.5% of the family's gross monthly income depending on the number of children in care.

For a family of 4 at the maximum eligibility of 145% FPL, the co-payment for a month of full-time care would equate to 5.2% - 5.9% of the family's gross monthly income depending on the number of children in care.

Iowa adjusts the eligibility levels annually (July 1st of each year) - based on the revised Federal Poverty Guidelines annually. It is therefore possible for some families' co-pay to remain the same or for the co-pay to actually decrease if the family income did not change.

4 Ensure Equal Access to High Quality Child Care for Low-Income Children

The 2014 reauthorization of the CCDBG Act is designed to help States and Territories advance improvements to the quality of child care in order to promote the healthy social-emotional, cognitive and physical development of participating children. Ensuring that low-income and vulnerable children can access high-quality care (and remain enrolled to school entry and beyond) is an equally important purpose of CCDBG. Payment levels and policies have a major impact on access.

The CCDBG Act of 2014 revises the requirement for a market rate survey (MRS) so that: (1) it must be statistically valid and reliable; and (2) it must reflect variations in the cost of child care services by geographic area, type of provider, and age of child. Also, a State/Territory may develop and conduct an alternative methodology for setting payment rates, such as a cost estimation model, to take into account the cost of meeting quality requirements.

To provide stability of funding and encourage more child care providers to participate in the subsidy program, the State/Territory's payment practices for CCDF child care providers must reflect generally

accepted payment practices of non-CCDF child care providers in the State/Territory, such as paying for supplies, field trips, registration fees. In addition, to the extent practicable, the State/Territory must implement enrollment and eligibility policies that support the fixed costs of providing child care services by delinking provider payments from a child's occasional absence due to holidays or unforeseen circumstances such as illness or closures due to emergency.

The CCDBG Act of 2014 added a provision that the State/Territory must also develop and implement strategies to increase the supply and improve the quality of child care services for: (1) children in underserved areas; (2) infants and toddlers; (3) children with disabilities (the CCDBG Act of 2014 added a new definition of child with disability (658(P)(3)); and (4) children who receive care during non-traditional hours. With respect to investments to increase access to programs providing high-quality child care and development services, the State/Territory must give priority to children of families in areas that have significant concentrations of poverty and unemployment and that do not have such programs. (658 E(c)(2)(M))

4.1 Parental Choice In Relation to Certificates, Grants or Contracts

The parent(s) of each eligible child who receive(s) or is offered financial assistance for child care services has the option of either enrolling such child with a provider that has a grant or contract for the provision of service or receiving a child care certificate. (658E(c)(2)(A)) This did not change under the CCDBG Act of 2014.

- 4.1.1 Describe how the parent of each eligible child is advised that the Lead Agency offers the option of selecting a provider that has a grant or contract or receiving a child care certificate (658E(c)(2)(A)(i), 658P(2)) The Lead Agency issues a child care certificate to parents either before or after the selection of a provider. The certificate provides details to the parents regarding providers (if a provider has been selected at time of approval), the number of units/hours approved, the amount of co-pay the parent will be responsible for, and the timeframe (eligibility period) the family is authorized to receive services.
- 4.1.2 Describe how the parent is informed of the option to choose from a variety of child care categories – such as private, not-for-profit, faith-based providers (if using a certificate), centers, family child care homes, or in-home providers (658E(c)(2)(A)(i), 658P(2), 658Q))
- ☐ Certificate form provides information about the choice of providers, including high quality providers
 - ☐ Certificate is not linked to a specific provider so parents can choose provider of choice
 - ☒ X Consumer education materials on choosing child care
 - ☒ X Referral to child care resource and referral agencies
 - ☐ Co-located resource and referral in eligibility offices

- ☒ X Verbal communication at the time of application
- ☐ Community outreach, workshops or other in-person activities
- ☐ Other. Describe _____

4.1.3 Child Care Services Available through Grants or Contracts

a) In addition to offering certificates, does the Lead Agency provide child care services through grants or contracts for child care slots? (658A(b)(1) **Note:** Do not check “yes” if every provider is simply required to sign an agreement in order to be paid in the certificate program.

- ☐ Yes. If yes, **describe** the type(s) of child care services available through grants or contracts, the entities who receive contracts (e.g., shared services alliances, child care resource and referral agencies, family child care networks, community based agencies, child care providers, etc.), the process for accessing grants or contracts, the range of providers available through grants or contracts, how rates are set for grants and contracts, how the State/Territory determines which entities to contract with for increasing supply and/or improving quality, and if contracts are offered statewide and/or locally: _____

- ☐ No. If no, skip to 4.1.4.

b) Will the Lead Agency use grants or contracts for child care services to achieve any of the following (check all that apply):

- ☐ Increase the supply of specific types of care with grants or contracts for:
- ☐ Programs to serve children with disabilities
 - ☐ Programs to serve infants and toddlers
 - ☐ Programs to serve school-age children
 - ☐ Programs to serve children needing non-traditional hour care
 - ☐ Programs to serve homeless children
 - ☐ Programs to serve children in underserved areas
 - ☐ Programs that serve children with diverse linguistic or cultural backgrounds
 - ☐ Programs that serve specific geographic areas
 - ☐ Urban
 - ☐ Rural
 - ☐ Other. Describe _____

- ☐ Improve the quality of child care programs with grants or contracts for:
- ☐ Programs providing comprehensive services, such as integrated child care in Head Start, Early Head Start, summer or other programs
 - ☐ Programs meeting higher quality standards, such as higher rated QRIS programs or state pre-k programs that meet higher quality standards
 - ☐ Programs to serve children with disabilities or special needs
 - ☐ Programs to serve infants and toddlers
 - ☐ Programs to serve school-age children
 - ☐ Programs to serve children needing non-traditional hour care
 - ☐ Programs to serve homeless children
 - ☐ Programs to serve children in underserved areas
 - ☐ Programs that serve children with diverse linguistic or cultural backgrounds
 - ☐ Programs that serve specific geographic areas
 - ☐ Urban
 - ☐ Rural
 - ☐ Other. Describe _____

4.1.4 The Lead Agency certifies policies and procedures are in place that afford parents unlimited access to their children whenever their children are in the care of a provider who receives CCDF funds. (658E(c)(2)(B)) This requirement did not change under the CCDBG Act of 2014. Describe the policies and procedures for unlimited access: The Lead Agency informs parents of this provision on the “Child Care Assistance” pamphlet given to parents at time of approval and it is included on the CCA Provider Agreement. In addition, regulations and handbook for child care centers and child development homes specify that unlimited access by parents must be provided. Example for child care center provider handbook: “Unlimited access. Parents shall be afforded unlimited access to their children and to the provider caring for their children during the center’s hours of operation or whenever their children are in the care of a provider, unless parental contact is prohibited by court order. The provider shall inform all parents of this policy in writing at the time the child is admitted to the center.”

4.1.5 The Lead Agency must allow for in-home care (i.e., care provided in the child's own home) but may limit its use. Will the Lead Agency limit the use of in-home care in any way?

☐ X Yes. If checked, what limits will the Lead Agency set on the use of in-home care? Check all that apply.

☐ X Restricted based on minimum number of children in the care of the provider to meet minimum wage law or Fair Labor Standards Act. **Describe**

☐ X Restricted based on provider meeting a minimum age requirement. Describe same requirement (18) as other nonregistered providers

☐ Restricted based on hours of care (certain number of hours, non-traditional work hours). Describe _____

☐ Restricted to care by relatives. Describe _____

☐ Restricted to care for children with special needs or medical condition. Describe _____

☐ X Restricted to in-home providers that meet some basic health and safety requirements. Describe does not really apply except for CPR training

☐ Other. Describe _____

☐ No

4.2 Assessing Market Rates and Child Care Costs

The new law revises the provisions for a market rate survey (MRS) so that: (1) it must be statistically valid and reliable; and (2) it must reflect variations in the price to parents of child care services by geographic area, type of provider, and age of child (658E(c)(4)(B)). A State/Territory has the option to develop and use a statistically valid and reliable alternative methodology for setting payment rates, such as a cost estimation model. Any payment rates established using an alternative methodology or market rate survey must be reviewed and approved by ACF as part of the CCDF Plan review process. Because the alternative methodology is a new basis for setting payment rates, we highly recommend any State or Territory considering an alternative methodology to submit a description of its proposed approach to the ACF Regional Office in advance of the Plan submittal in order to avoid delays with Plan approval.

The MRS or alternative methodology must be developed and conducted no earlier than two years before the date of submission of the Plan (instead of two years before the effective date of the Plan, as previously required for the MRS).

The State must consult with the State Advisory Council or other state- or state-designated cross-agency body if no SAC, local child care program administrators, local child care resource and referral agencies, and other appropriate entities prior to developing and conducting the MRS or alternative methodology.

The State/Territory must prepare a detailed report containing the results of the MRS or alternative methodology. The State must make the report with these results widely available no later than 30 days after completion of the MRS or alternative methodology, including posting the results on the Internet in an easily interpretable and understandable form.

The State/Territory must set CCDF subsidy payment rates in accordance with the results of the current MRS or alternative methodology. When setting payment rates, the law requires States and Territories to take into consideration the cost of providing higher quality child care services than were provided prior to November 2014 (e.g., tiered reimbursement or other methods) and without, **to the extent practicable**, reducing the number of families receiving CCDF relative to the number served as of November 2014.

4.2.1 Developing and Conducting a Market Rate Survey (MRS) and/or an Alternative Methodology.

Did the State/Territory conduct a statistically and valid and reliable MRS, alternative methodology or both between July 1, 2013 and March 1, 2016?

- ☒ X MRS
- ☐ Alternative Methodology. Describe _____
- ☐ Both. Describe _____
- ☐ Other. Describe _____

4.2.2 Describe how the State consulted with the State Advisory Council or other state- or state-designated cross-agency body if no SAC, local child care program administrators, local child care resource and referral agencies, and other appropriate entities prior to developing and conducting the MRS or alternative methodology. The most recent market rate survey was completed and compiled prior to the new requirement established under the CCDBG Act of 2014. However, the State Child Care Advisory Committee, and advisory body to the Lead Agency (but not the SAC), has served as an ongoing advisory source for the market rate survey over the years. Information on the process of the survey is provided to them, as well as the results of the analysis. Members of that body also serve on the SAC and other members of the SAC may receive information via the Lead Agency bi-monthly updates to the SCCAC. In addition, the Child Care Resource and Referral Agencies serve as the primary data point for the market rate information via the use of NACCRRWARE. By contract, they are to have the private pay rates of providers in their database updated by September first of each year. Prior to the next survey, the Lead Agency will engage the SAC, the SCCAC, legislators and other key stakeholders

in conversation regarding the CCDBG requirements, the current structure of the MRS process, and suggestions for improvements.

- 4.2.3 Describe how the market rate survey or alternative methodology is statistically valid and reliable. To be considered valid and reliable, the MRS or alternative methodology must represent the child care market, provide complete and current data, use rigorous data collection procedures, reflect geographic variation, and analyze data in a manner that captures other relevant differences. For example, market rate surveys can use administrative data such as child care resource and referral data if they are representative of the market. If an alternative methodology such as cost modeling is used, demonstrate that the methodology used reliable models that estimated the cost of delivering services in center- and home-based settings at each level of quality defined by the State/Territory.

Iowa uses the Statewide CCR&R NACCRRAware database of active full-time child care providers for their Market Rate Survey. R&R's required to update rates by Sept 1st in contract.

Iowa uses SPSS Statistical software to analyze the Market Rate Survey data. Methodology used: First, all provider rates are converted to half-day rates (as Iowa reimburses on a half-day unit rate). The rates are then split out by type of care and age groups to make 12 separate rate categories. The 75th percentile of each of the 12 rate categories is then calculated. Note: For current survey, we also ran an additional analysis of hourly rates.

From the 2014 Market Rate Survey, there were a total of 4,067 un-duplicated providers in the survey.

Of these:

1,445 or 36% said they charge Hourly rates

983 or 24% said they charge Daily rates

2,295 or 56% said they charge Weekly rates

88 or 2% said they charge Monthly rates

Note: The total of these four rate types is 4,811, because many providers said they charge multiple rate types.

4.2.4 Describe how the market rate survey reflects variations in the price of child care services by:

- a) Geographic area (e.g., statewide or local markets) For analysis purposes, the survey rates are categorized by statewide and urban/rural. Urban counties are separated out using the Metropolitan Statistical Areas defined by the U.S. Office of Management and Budget for Census Data.
- b) Type of provider Rates are categorized and analyzed for licensed child care center; registered child development home Categories A, B and C; and non-registered child care homes.
- c) Age of child Rates are categorized and analyzed for infant and toddler (2 weeks to two years), Preschool (aged 2 to kindergarten), and school-aged (in attendance in full day or half-day classes including kindergarten)
- d) Describe any other key variations examined by the market rate survey, such as quality level The reimbursement structure used also categorizes rates for the provider types and ages of children above for children with special needs. However, due to difficulty gathering rate data specific to that type of care, the rates have remained unchanged for those established in 1998. The Lead Agency continues to be interested in exploring alternate methods to supporting the care needs of those children. In addition, the non-registered child care home rates continue to be frozen at a pre-1996 rates as an incentive to encourage registration (i.e, regulation).

4.2.5 Describe the process used by the State/Territory to prepare a detailed report containing the results and make the report widely available to the public.

- a) Date of completion of the market rate survey or alternative methodology (must be no earlier than July 1, 2013 and no later than March 1, 2016) Fall 2014
- b) Date report containing results were made widely available, no less than 30 days after the completion of the report As the most recent market rate survey was completed and compiled prior to the new requirement established under the CCDBG Act of 2014, the rates were not made widely available within 30 days. However, the rate comparison information from that market rate survey was provided to the State Child Care Advisory Committee (SCCAC) in January 2015.
- c) How the report containing results was made widely available including the internet address where the report is posted In addition to the sharing with the SCCAC the

results and corresponding costs to implement, the information is available on the Lead Agency website at:

4.3 Setting Payment Rates

4.3.1 Provide the base payment rates and percentiles (based on current MRS) for the following categories. The ages and types of care are meant to provide a snapshot of categories on which rates may be based and are not intended to be comprehensive of all categories that may exist in your State/Territory. Please use the most populous geographic region (serving highest number of children).

- a) Infant (6 months), full-time licensed center care in most populous geographic region
 - Rate 16.78
 - Percentile 40th
- b) Infant (6 months), full-time licensed FCC care in most populous geographic region
 - Rate Category A & B = 12.98; Category C = 12.44; Non-registered = 8.19
 - Percentile Category A& B = 60th; Category C = 25th
- c) Toddler (18 months), full-time licensed center care in most populous geographic region
 - Rate 16.78
 - Percentile 40th
- d) Toddler (18 months), full-time licensed FCC care in most populous geographic region
 - Rate Category A & B = 12.98; Category C = 12.44; Non-registered = 8.19
 - Percentile Category A& B = 60th; Category C = 25th
- e) Preschooler (4 years), full-time licensed center care in most populous geographic region
 - Rate 13.53
 - Percentile 25th
- f) Preschooler (4 years), full-time licensed FCC care in most populous geographic region
 - Rate Category A & B = 12.18; Category C = 12.18; Non-registered = 7.19
 - Percentile Category A& B = 40th; Category C = 30th
- g) School-age child (6 years), full-time licensed center care in most populous geographic region
 - Rate 12.18
 - Percentile 50th
- h) School-age child (6 years), full-time licensed FCC care in most populous geographic region
 - Rate Category A & B = 10.82; Category C = 10.82; Non-registered = 7.36

- Percentile Category A& B = 50th; Category C = 45th

i) Describe the calculation/definition of full-time care: Rates are set as half-day units. A half day unit is up to five hours of care. Full time care is assumed to be at least 10 units a week.

4.3.2 States and Territories may choose to set base payment rates that differ because they take into consideration such factors as 1) geographic location, 2) age of child, 3) needs of children (special needs, protective services, etc.), 4) non-traditional hours of care, or 5) quality of care. In other words, base rates for infants may be set at a higher level than for school-age care because the cost of providing infant care tends to be higher than school-age care. In addition to these rates that differ tied to market variations in prices, States and Territories can choose to establish tiered rates or add-ons on top of these variable base rates as a way to increase payment rates for targeted needs (i.e., higher rate for special needs children as both an incentive for providers to serve children with special needs and as a way to cover the higher costs to the provider to provide care for special needs children).

Check which types of tiered payment or rate add-on, if any, the Lead Agency has chosen to implement. In the description of any tiered rates or add-ons, indicate the process and basis used for determining the tiered rates, amount or percentage of the tiered rate/add-on, and indicate if the rates were set based on the MRS or another process.

☐ Tiered rate/rate add-on for non-traditional hours. Describe _____

X Tiered rate/rate add-on for children with special needs as defined by the State/Territory. Describe Iowa has a half-day rate established for children who meet the state's definition of special needs and the need results in the provider needing to provide adaptive equipment, increased supervision or care, or receive specialized training.

☐ Tiered rate/rate add-on for infants and toddlers (do not check if you have a different base rate for infants/toddlers with no separate bonus or add-on). Describe _____

☒ X Tiered rate/rate add-on for programs meeting higher quality as defined by the State/Territory. Describe Lead Agency intends to implement a higher rate for all provider types that achieve a Level 5 in the state's Quality Rating System (QRS). Those providers serving children eligible for CCA will be reimbursed at the most recently completed market survey rates (currently 2014). For centers across the 3 age groups, the half-day unit rates would increase from \$16.78 to \$20.50 for infants and toddlers, \$13.53 to \$17.50 for preschool, and \$12.18 to \$14.75 for school agers. For Child Development Homes Category A & B, the half-day unit rate increases would be \$12.98 to \$13.75 for infants and toddlers, \$12.18 to \$13.50 for

preschoolers, and \$10.82 to \$12.50 for school agers. For Child Development Homes Category C, the half-day unit rate increases would be \$12.44 to \$15.00 for infants and toddlers, \$12.18 to \$13.75 for preschoolers, and \$10.82 to \$13.00 for school agers.

- ☐ Tiered rate/rate add-on for programs serving homeless children. Describe _____
- ☐ Other tiered rate/rate add-on beyond the base rate. Describe _____
- ☐ None.

4.3.3 Describe how the State/Territory set payment rates for child care services in accordance with the results of the most recent market rate survey or alternative methodology ____

4.3.4 In setting payment rates, how did the State/Territory take into consideration the cost of providing higher quality child care services than were provided prior to November 2014 (e.g., tiered payment or other methods) and without, to the extent practicable, reducing the number of families receiving CCDF relative to the number of families served as of November 2014. For example, providing tiered payment with a sufficient differential to support higher quality, considering the cost of quality using a cost estimation model or other method, or examining the participation rate of high-quality providers in the subsidy system (e.g., using indicators from a quality rating system, accreditation or other state-defined indicators of quality) and adjusting payment rates if necessary. Lead Agency intends to implement a higher rate for all provider types that achieve a Level 5 in the state's Quality Rating System (QRS). Those providers serving children eligible for CCA will be reimbursed at the most recently completed market survey rates (currently 2014). For centers across the 3 age groups, the half-day unit rates would increase from \$16.78 to \$20.50 for infants and toddlers, \$13.53 to \$17.50 for preschool, and \$12.18 to \$14.75 for school agers. For Child Development Homes Category A & B, the half-day unit rate increases would be \$12.98 to \$13.75 for infants and toddlers, \$12.18 to \$13.50 for preschoolers, and \$10.82 to \$12.50 for school agers. For Child Development Homes Category C, the half-day unit rate increases would be \$12.44 to \$15.00 for infants and toddlers, \$12.18 to \$13.75 for preschoolers, and \$10.82 to \$13.00 for school agers.

4.4 Summary of Facts Used to Determine that Payments Rates Are Sufficient to Ensure Equal Access

The CCDF plan shall provide a summary of data and facts relied on by the State/Territory to certify that payment rates are sufficient to ensure equal access. (658E (c)(4)(A)) Equal access is not limited to a single percentile alone but is inclusive of various metrics or benchmarks that would offer children receiving CCDF access to the same services (type of care, quality of care) as children not receiving CCDF.

4.4.1 What data and facts did the State use to determine equal access (i.e., what is your metric or benchmark of equal access – such as percentile that rates cover or proportion of costs covered)? Check all that apply and describe.

- ☒ X Payment rates are set at the 75th percentile or higher of the most recent survey. Describe. At the establishment of the 2004 rates, they were set at the 75th percentile of that market rate data.
- ☐ Using tiered rates/differential rates as described in 4.3.3 to increase access for targeted needs.
- ☐ Rates based on data on the cost to the provider of providing care meeting certain standards. Describe _____
- ☒ X Data on the size of the difference (in terms of dollars) between payment rates and the 75th percentile in the most recent survey, if rates are below the 75th percentile. Describe Comparison data across the market rate years provided information to set a tiered level for QRS Level 5 providers to support providers achieving the highest and most rigorous level in the QRS and serving children most in need in the high quality setting.
- ☐ Data on the proportion of children receiving subsidy being served by high-quality providers. Describe _____
- ☐ Data on where children are being served showing access to the full range of providers. Describe _____
- ☐ Feedback from parents, including parent survey or parent complaints. Describe _____
- ☐ Other. Describe _____

4.4.2 Does the State/Territory certify that payment rates are sufficient to ensure equal access either based on the current MRS or alternative methodology?

- ☐ Yes. The State/Territory certifies that payment rates are sufficient to ensure equal access. Provide the State's definition of equal access
- ☐ No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

- Overall Target Completion Date (no later than September 30, 2016) _____
- Unmet Requirement(s) – Identify the requirement(s) that is not fully complete or implemented _____
- Current Status – Describe the State/Territory’s status toward completion for any requirement(s) not fully implemented (not yet started, in progress, partially completed, substantially completed, other) _____
- Tasks/Activities – What specific steps will you take to complete the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) _____
 - Projected start date for each activity _____
 - Projected end date for each activity _____
 - Agency – Who is responsible for completion of this activity _____
 - Partners – Who is the responsible agency partnering with to complete this activity _____

4.5 Payment Practices and Timeliness of Payments

The CCDBG Act of 2014 added a provision that requires States and Territories to describe in the Plan how the State/Territory’s payment practices for CCDF child care providers reflect generally accepted payment practices of non-CCDF child care providers in the State/Territory —so as to provide stability of funding and encourage more child care providers to participate in the subsidy program. To the extent practicable, the State/Territory must implement enrollment and eligibility policies that support the fixed costs of providing child care services by delinking provider payments from a child’s occasional absences due to holidays or unforeseen circumstances such as illness. (658E(c)(2)(S))

4.5.1 Describe the status of State/Territory’s payment practices for CCDF child care providers that reflect generally accepted payment practices of non-CCDF child care providers in the State/Territory.

- ☐ Fully implemented and meeting all Federal requirements outlined above. Describe using 4.5.2 through 4.5.3 below.
- ☐ Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or

tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

- Overall Target Completion Date (no later than September 30, 2016) _____
- Unmet Requirement(s) – Identify the requirement(s) that is not fully complete or implemented _____
- Current Status – Describe the State/Territory’s status toward completion for any requirement(s) not fully implemented (not yet started, in progress, partially completed, substantially completed, other) _____
- Tasks/Activities – What specific steps will you take to complete the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) _____
 - Projected start date for each activity _____
 - Projected end date for each activity _____
 - Agency – Who is responsible for completion of this activity _____
 - Partners – Who is the responsible agency partnering with to complete this activity _____

4.5.2 Describe how the payment practices to child care providers who serve CCDF-assisted children reflect generally accepted payment practices of other child care providers in the State/Territory to ensure stability of funding to encourage more child care providers to serve children who receive CCDF assistance. The Lead Agency ...

- ☐ Pays prospectively prior to the delivery of services. Describe _____
- ☒ X Pays within no more than 21 days of billing for services. Describe. State law requires DHS to pay providers within 10 business days. Rate has been at 99%+ since the law went into effect.
- ☐ Supports fixed costs of providing child care services by delinking provider payments from a child’s occasional absences by paying based on enrollment instead of attendance. Describe _____
- ☐ Supports fixed costs of providing child care services by delinking provider payments from a child’s occasional absences by providing full payment if a child attends at least 80 percent of authorized time. Describe _____
- ☒ X Supports fixed costs of providing child care services by delinking provider payments from a child’s occasional absences by providing full payment if a child is absent for a certain number of days in a month. Describe (including number of absence days allowed and paid for) Providers may bill for up to 4 absences per child per month.

- ☒ X Pays on a full-time or part-time basis (rather than smaller increments such as hourly) Rates are set at a half-day unit up to 5 hours.
- ☒ X Pays for standard and customary fees that the provider charges private-paying parents (e.g., registration fees, deposits, supplies, field trips, etc.) Providers are allowed to charge additional incidental fees such as field trips or late fees when a child is not picked up timely.
- ☐ Provides prompt notice to providers regarding any changes to the family's eligibility status that may impact payment _____
- ☒ X Has a timely appeal and resolution process for payment inaccuracies and disputes. Describe Provider can file an appeal at no cost if they disagree with a decision or payment. If they file within 10 days of the decision or before the decision takes effect, they can retain any payment made to them pending the final decision on the appeal.
- ☐ Other. Describe Allowing on-line attendance and invoicing for providers, direct deposit of payments, providers can bill every two weeks, etc.

4.5.3 Check and describe the strategies the State/Territory will use to ensure the timeliness of payments.

- ☒ X Policy on length of time for making payments. Describe length of time 10 business days from the receipt of a complete and accurate billing or attendance form.
- ☐ Track and monitor the payment process. **Describe.** The Office of Field Support runs a regular/monthly report on billing timeliness
- ☐
- ☒ X Use of electronic tools (e.g., automated billing, direct deposit, etc.) Describe electronic invoicing, direct deposit.
- ☐ Other. Describe _____

4.6 Supply Building Strategies to Meet the Needs of Certain Populations

The CCDBG Act of 2014 added a provision that the State/Territory will develop and implement strategies to increase the supply and improve the quality of child care services for children in underserved areas, infants and toddlers, children with disabilities, and children who receive care during non-traditional hours. (658 E(c)(2)(M))

4.6.1 Has the State/Territory conducted data analysis of existing and growing supply needs?

- ☒ X Yes. Describe data sources _____ CCA vs. Child pop by county and QRS
- ☐ No. If no, how does the State/Territory determine most critical supply needs?

4.6.2 Describe what method(s) is used to increase supply and improve quality for:

a) Infants and toddlers

- ☐ Grants and contracts (as discussed in 4.1.3)
- ☐ Family child care networks
- ☐ Start-up funding and technical assistance support
- ☐ Recruitment of providers
- ☐ Tiered payment rates (as discussed in 4.4.1)
- ☐ Other. Describe _____

b) Children with disabilities

- ☐ Grants and contracts (as discussed in 4.1.3)
- ☐ Family child care networks
- ☐ Start-up funding and technical assistance support
- ☐ Recruitment of providers
- ☐ Tiered payment rates (as discussed in 4.4.1)
- ☐ Other. Describe _____

c) Children who receive care during non-traditional hours

- ☐ Grants and contracts (as discussed in 4.1.3)
- ☐ Family child care networks
- ☐ Start-up funding and technical assistance support
- ☐ Recruitment of providers
- ☐ Tiered payment rates (as discussed in 4.4.1)
- ☐ Other. Describe _____

d) Homeless children

- ☐ Grants and contracts (as discussed in 4.1.3)
- ☐ Family child care networks
- ☐ Start-up funding and technical assistance support
- ☐ Recruitment of providers
- ☐ Tiered payment rates (as discussed in 4.4.1)
- ☐ Other. Describe _____

4.6.3 The CCDBG Act of 2014 requires States to describe the procedures and process it uses, in terms of the investments made to increase access to programs providing high quality child care and development services, to give priority for those investments to children in families in areas that have significant concentrations of poverty and unemployment and that do not have such high-quality programs. (658E(c)(2)(Q)) Describe the status of State/Territory's process and procedures to give priority for investments to children and families from areas with high concentrations of poverty and unemployment that do not have high-quality programs.

- ☐ Fully implemented and meeting all Federal requirements outlined above. Describe

- ☒ **X Not implemented.** If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.
 - Overall Target Completion Date (no later than September 30, 2016) _____
 - Unmet Requirement(s) – Identify the requirement(s) that is not fully complete or implemented _____
 - Current Status – Describe the State/Territory's status toward completion for any requirement(s) not fully implemented (not yet started, in progress, partially completed, substantially completed, other) _____
 - Tasks/Activities – What specific steps will you take to complete the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) _____
 - Projected start date for each activity _____
 - Projected end date for each activity _____

- Agency – Who is responsible for completion of this activity _____
- Partners – Who is the responsible agency partnering with to complete this activity _____

5 Establish Standards and Monitoring Processes to Ensure the Health and Safety of Child Care Settings

The CCDBG Act of 2014 makes child care safer by defining minimum health and safety requirements for child care providers. This includes both the standards that must be established and the pre-service/orientation and ongoing minimum training required. States and Territories must also explain why exemptions to any of the licensing standards did not endanger the health and safety of CCDF children in license-exempt care. States and Territories are required to have standards for CCDF providers regarding group size limits and appropriate child-to-provider ratios based on the age of children in child care.

Pre-licensure and annual unannounced inspections of licensed CCDF providers and annual inspections of license-exempt CCDF providers are now required. The CCDBG Act of 2014 requires States and Territories to establish qualifications and training for licensing inspectors and appropriate inspector-to-provider ratios. It also requires States and Territories to conduct criminal background checks for all child care staff members, including staff members who don't care directly for children but have unsupervised access to children and lists specific disqualifying crimes. States and Territories must certify that all child care providers comply with child abuse reporting requirements of CAPTA (mandatory reporting of known and suspected instances of child abuse and neglect).

5.1 Licensing Requirements and Standards

Each State/Territory is required to certify it has in effect licensing requirements applicable to all child care services provided within the State/Territory (not restricted to providers receiving CCDF), and to provide a detailed description of such requirements and how such requirements are effectively enforced. (658E(c)(2)(I)(i))

- 5.1.1 The State/Territory certifies that it has licensing requirements applicable to child care services provided within the State. (658(c)(2)(F)) This requirement did not change under the CCDBG Act of 2014. **List the categories of care** that your State/Territory licenses and provide your definition of each licensed category of care: _____

- 5.1.2 Does your State/Territory exempt any child care providers from its licensing requirements?

- ☒ X Yes. If the State/Territory exempts any child care providers from State/Territory licensing requirements, the CCDBG Act of 2014 requires States and Territories to describe how such licensing exemptions do not endanger the health, safety, and

development of children who receive services from license exempt providers.
(658E(c)(2)(F)(ii)) Describe who is exempt from licensing and how such exemptions do not endanger children who receive services from exempt providers. _____

☐ No

5.1.3 Describe the status of the State/Territory's development and implementation of child care standards for providers receiving CCDF that address appropriate ratios between the number of children and the number of providers and group size, in terms of the age of the children for each type of setting. (658E(c)(2)(H))

☒ **X Fully implemented** and meeting all Federal requirements outlined above.
Describe using 5.1.4 and 5.1.5 below.

☐ Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

- Overall Target Completion Date (no later than September 30, 2016) _____
- Unmet Requirement(s) – Identify the requirement(s) that is not fully complete or implemented _____
- Current Status – Describe the State/Territory's status toward completion for any requirement(s) not fully implemented (not yet started, in progress, partially completed, substantially completed, other) _____
- Tasks/Activities – What specific steps will you take to complete the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) _____
 - Projected start date for each activity _____
 - Projected end date for each activity _____
 - Agency – Who is responsible for completion of this activity _____
 - Partners – Who is the responsible agency partnering with to complete this activity _____

5.1.4 Describe how the State/Territory child care standards for providers receiving CCDF address appropriate ratios between the number of children and the number of providers and group size, in terms of the age of the children for each type of setting. (658E(c)(2)(H))

a) Licensed Center-Based Care

1. Infant

- State/Territory age definition: “Infant” means a child who is less than twenty-four months of age.
- Ratio: 1:4
- Group size: The Lead Agency does not impose specific group size requirements but rather establishes those via square footage requirements. Each room is licensed with a capacity based on 80 square feet of usable floor space or sufficient floor space to provide 35 sq ft usable floor space per child. Rooms with cribs occupying floor space must have 40 square feet per child.

2. Toddler

- State/Territory age definition: Iowa does not have a toddler definition.
- Ratio: 1:4
- Group size: The Lead Agency does not impose specific group size requirements but rather establishes those via square footage requirements. Each room is licensed with a capacity based on 80 square feet of usable floor space or sufficient floor space to provide 35 sq ft usable floor space per child. Rooms with cribs occupying floor space must have 40 square feet per child.

3. Preschool

- State/Territory age definition: children ages three through five
- Ratio: 1:12 is specific to 4 year olds; 1:8 is for 3 year olds; 1:6 for 2 year olds
- Group size: The Lead Agency does not impose specific group size requirements but rather establishes those via square footage requirements. Each room is licensed with a capacity based on 80 square feet of usable floor space or sufficient floor space to provide 35 sq ft usable floor space per child. Rooms with cribs occupying floor space must have 40 square feet per child.

4. School-Age

- State/Territory age definition: kindergarten or a higher grade level
- Ratio: 1:15
- Group size: The Lead Agency does not impose specific group size requirements but rather establishes those via square footage requirements. Each room is licensed with a capacity based on 80 square feet of usable floor space or sufficient floor space to provide 35 sq ft usable floor space per

child. Rooms with cribs occupying floor space must have 40 square feet per child.

5. If any of the responses above are different for exempt child care centers, describe Not applicable.
6. Describe, if applicable, ratios and group sizes for centers with mixed age groups Combinations of age groupings for children four years of age and older may be allowed and may have staff ratio determined on the age of the majority of the children in the group. If children three years of age and under are included in the combined age group, the staff ratio for children aged three and under shall be maintained for these children. Preschools shall have staff ratios determined on the age of the majority of the children, including children who are three years of age. If a child between the ages of 18 and 24 months is placed outside the infant area the staff ratio of 1 to 4 shall be maintained as would otherwise be required for the group until the child reaches the age of two.

b) Licensed Group Child Care Homes:

1. Infant
 - State/Territory age definition: “Infant” means a child who is less than twenty-four months of age.
 - Ratio: 1:4
 - Group size: 4 total under 24 months
2. Toddler
 - State/Territory age definition: Iowa does not have a toddler definition.
 - Ratio: 1:4
 - Group size: 4 total under 24 months
3. Preschool
 - State/Territory age definition: children ages three through five
 - Ratio: 1:12
 - Group size: 12
4. School-Age
 - State/Territory age definition: kindergarten or a higher grade level.
 - Ratio: 1:16
 - Group size: 16

5. Describe the maximum number of children that are allowed in the home at any one time, if the State/Territory requires the provider's own children to be included in the child-to-provider ratio or group size, or the limits on infants and toddlers or additional school-age children that are allowed for part of the day 16

Category C Homes have a co-provider. All of the provider's own children that are not Kindergarten or higher are counted within the ratio.

No more than 12 children under Kindergarten or higher grade level can be present at any one time. Of those 12, no more than 4 children 24 months of age or younger may be present. They may have 4 under 18 months but if so, both providers must be present. In addition to the 12 preschool aged children, an additional 2 school aged children may be present for a period of less than 2 hours at any one time. In addition to those 14, no more than 2 additional children may be present when utilizing part time hours.

6. If any of the responses above are different for exempt group child care homes, describe Non-registered or license exemp may only serve 5 or fewer children.

☐ N/A. State/Territory does not have group child care homes.

c) Licensed Family Child Care:

1. Describe the ratios CATEGORY A No more than six children not attending kindergarten or a higher grade level shall be present at any one time. Of these six children, not more than four children who are 24 months of age

or younger shall be present at any one time. Of these four children, no more than three may be 18 months of age or younger. In addition to the six children not in school, no more than two children who attend school may be present for a period of less than two hours at a time. No more than eight children shall be present at any one time when an emergency school closing is in effect.

CATEGORY B No more than six children not attending kindergarten or a higher grade level shall be present at any one time. Of these six children, not more than four children who are 24 months of age or younger shall be present at any one time. Of these four children, no more than three may be 18 months of age or younger. In addition to the six children not in school, no more than four children who attend school may be present. In addition to these ten children, no more than two children who are receiving care on a part-time basis may be present. No more than 12 children shall be present at any one time when an emergency school closing is in effect. If more than eight children are present at

any one time for a period of more than two hours, the provider shall be assisted by a Department approved assistant who is at least 14 years old.

group size The group limits for Child Development Homes are imbedded within the overall capacity and limits on hours of care pertaining to specific ages/child count.

Describe the threshold for when licensing is required: registration is required when the 6th child is present,

Describe the maximum number of children that are allowed in the home at any one time:
Category A = 8 Category B = 12

Describe if the State/Territory requires the provider's own children to be included in the Child-to-Provider ratio or group size: Children counted. In determining the number of children cared for at any one time in a child development home, each child present shall be considered to be receiving care unless the child is described by one of the following exceptions: a. The child's parent, guardian, or custodian established or operates the child development home and either the child is attending school or the child receives child care full-time on a regular basis from another person. b. The child has been present in the child development home for more than 72 consecutive hours and meets the requirements of the exception in paragraph "a" as though the person who established or operates the child development home is the child's parent, guardian, or custodian

Describe the limits on infants and toddlers or additional school-age children that are allowed for part of the day: No more than 4 children who are 24 months of age or younger shall be in care at any one time. Whenever 4 children who are under the age of 18 months are in care, both providers shall be present. No more than 12 children not attending kindergarten or a higher grade level shall be present at any one time. If more than 8 children are present at any one time both providers must be present.

2. If any of the responses above are different for exempt family child care home providers, describe Non-registered may care for less than 6 children. There are no age restrictions for the children served.

d) Any other eligible CCDF provider categories:

Describe the ratios, Non-registered, license-exempt homes may care for five or fewer children. There are no age restrictions.

group size , the threshold for when licensing is required , maximum number of children that are allowed in the home at any one time , if the State/Territory requires the provider's own children to be included in the child-to-provider ratio or

group size [REDACTED], or the limits on infants and toddlers or additional school-age children that are allowed for part of the day [REDACTED]

- 5.1.5 Describe how the State/Territory child care standards address required qualifications for providers appropriate to each type of setting, including the minimum age allowed, minimum education level, any specific content required related to the age of children. (658E(c)(2)(H))

a) Licensed Center-Based Care:

1. Infant lead teacher Iowa does not designate lead teacher vs assistant by rule. High School diploma or GED / Must be at least age 16 years of age and assistant teacher qualifications: Iowa does not designate lead teacher vs assistant by rule. High School diploma or GED / Must be at least age 16. Any person under the age of 18 must be under direct supervision of an adult.
2. Toddler lead teacher Iowa does not designate lead teacher vs assistant by rule. High School diploma or GED / Must be at least age 16 and assistant teacher qualifications: Iowa does not designate lead teacher vs assistant by rule. High School diploma or GED / Must be at least age 16. Any person under the age of 18 must be under direct supervision of an adult.
3. Preschool lead teacher Iowa does not designate lead teacher vs assistant by rule. High School diploma or GED / Must be at least age 16 and assistant teacher qualifications: Iowa does not designate lead teacher vs assistant by rule. High School diploma or GED / Must be at least age 16. Any person under the age of 18 must be under direct supervision of an adult.
4. School-Age lead teacher Iowa does not designate lead teacher vs assistant by rule. High School diploma or GED / Must be at least age 16 and assistant teacher qualifications: Iowa does not designate lead teacher vs assistant by rule. High School diploma or GED / Must be at least age 16. Any person under the age of 18 must be under direct supervision of an adult.
5. Director qualifications: _____
a. Is at least 21 years of age. b. Has obtained a high school diploma or passed a general education development test. c. Has completed at least one course in business administration or 12 contact hours in administrative-related training related to personnel, supervision, record keeping, or budgeting or has one year of administrative-related experience. d. Has certification in infant, child, and adult cardiopulmonary resuscitation (CPR), first aid, and Iowa's training for the mandatory reporting of child abuse. e. Has achieved a total of 100 points obtained through a combination of education, experience, and child development-related training as outlined in the following chart:

EDUCATION		EXPERIENCE (Points multiplied by years of experience)		CHILD DEVELOPMENT- RELATED TRAINING
Bachelor's or higher degree in early childhood, child development, or elementary education	75	Full-time (20 hours or more per week) in a child care center or preschool setting	20	One point per contact hour of training
Associate's degree in child development or bachelor's degree in a child-related field	50	Part-time (less than 20 hours per week) in a child care center or preschool setting	10	
Child development associate (CDA) or one-year diploma in child development from a community college or technical school	40	Full-time (20 hours or more per week) child development-related experience	10	
Bachelor's degree in a non-child-related field	40	Part-time (less than 20 hours per week) child development-related experience	5	
Associate's degree in a non-child-related field or completion of at least two years of a four-year degree	20	Registered child development home provider	10	
		Nonregistered family home provider	5	

(1) In obtaining the total of 100 points, a minimum of two categories must be used, no more than 75 points may be achieved in any one category, and at least 20 points shall be obtained from the experience category. (2) Points obtained in the child development-related training category shall have been taken within the past five years. (3) For directors in centers predominantly serving children with special needs, the directors may substitute a disabilities-related or nursing degree for the bachelor's degree in early childhood, child development or elementary education in determining point totals. In addition, experience in working with children with special needs in an administrative or direct care capacity shall be equivalent to full-time experience in a child care center or preschool in determining point totals. (4) For directors in centers serving predominantly school-age children, the directors may substitute a degree in secondary education, physical education, recreation or related fields for the bachelor's degree in early childhood, child development or elementary education in determining point totals. In addition, child-related experience working with school-age children shall be equivalent to full-time experience in a child care center or preschool in determining point totals.

b) Licensed Group Child Care Homes:

1. Infant lead teacher Iowa does not designate lead teacher vs. assistant by rule. Child Development Category C: High School Diploma or GED plus 5 years experience as a registered or non-registered or a CDA or a 2 or 4 year degree in a child related field and 4 years experience; must be at least 21 years of age; and assistant qualifications: Does not designate.
2. Toddler lead teacher Iowa does not designate lead teacher vs. assistant by rule. Child Development Category C: High School Diploma or GED plus 5 years experience as a registered or non-registered or a CDA or a 2 or 4 year degree in a child related field and 4 years experience; must be at least 21 years of age; and assistant qualifications: Does not designate.
3. Preschool lead teacher Iowa does not designate lead teacher vs. assistant by rule. Child Development Category C: High School Diploma or GED plus 5 years experience as a registered or non-registered or possess a CDA or a 2 or 4 year degree in a child related field and 4 years experience; must be at least 21 years of age; and assistant qualifications: Does not designate.
4. School-Age lead teacher Iowa does not designate lead teacher vs. assistant by rule. Child Development Category C: High School Diploma or GED plus 5 years experience as a registered or non-registered or a CDA or a 2 or 4 year degree in a child related field and 4 years experience; must be at least 21 years of age; and assistant qualifications: Does not designate.

☐ N/A. State/Territory does not have group child care homes.

c) Licensed Family Child Care home provider qualifications: Child Development Home Category A: Provider must have 3 references and be at least 18 years of age. Child Development Home Category B: High School Diploma or GED plus 2 years experience as a registered or non-registered or possess a CDA or a 2 or 4 year degree in a child related field and 1 year experience; must be at least 20 years of age

d) Other eligible CCDF provider qualifications: There are no qualifications for non-registered, license exempt homes.

- 5.1.6 The CCDBG Act of 2014 added a new provision specifying that States and Territories must 1) establish health and safety requirements for providers serving children receiving CCDF assistance relating to matters included in the topics listed below, and 2) have pre-service or orientation training requirements, appropriate to the provider setting, that address these health and safety topics. (658E(c)(2)(I)(i)) This requirement is applicable to all child care providers receiving CCDF regardless of licensing status (licensed or license-exempt). The only exception to this requirement is for providers who are caring for their own relatives, as States have the option of exempting relatives from some or all CCDF health and safety requirements.

a) The State/Territory certifies that it has health and safety requirements for providers receiving CCDF in the following areas:

- Prevention and control of infectious diseases (including immunization)
- Prevention of sudden infant death syndrome and use of safe sleeping practices
- Administration of medication, consistent with standards for parental consent
- Prevention of and response to emergencies due to food and allergic reactions
- Building and physical premises safety, including identification of and protection from hazards that can cause bodily injury such as electrical hazards, bodies of water, and vehicular traffic
- Prevention of shaken baby syndrome and abusive head trauma
- Emergency preparedness and response planning for emergencies resulting from a natural disaster, or a man-caused event (*homes*) (such as violence at a child care facility), within the meaning of those terms under section 602(a) (1) of the Robert T. Stafford Disaster Relief and Emergency Assistance Act (42 U.S.C. 5195a(a)(1))
Do we need to have specific rules for evacuation, relocation, reunification, and planning for children with special needs
- Handling and storage of hazardous materials and the appropriate disposal of bio contaminants
- Precautions in transporting children (if applicable)
- First aid and cardiopulmonary resuscitation (CPR) certification

☐ Yes. The State/Territory certifies that it has health and safety requirements for CCDF providers in these areas.

☐ **X** No. If no, the State/Territory must provide a State/Territory-specific **implementation plan** for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

- Overall Target Completion Date (no later than September 30, 2016) _____
- Unmet Requirement(s) – Identify the requirement(s) that is not fully complete or implemented _____

- Current Status – Describe the State/Territory’s status toward completion for any requirement(s) not fully implemented (not yet started, in progress, partially completed, substantially completed, other) _____
 - Tasks/Activities – What specific steps will you take to complete the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) _____
 - Projected start date for each activity _____
 - Projected end date for each activity _____
 - Agency – Who is responsible for completion of this activity _____
 - Partners – Who is the responsible agency partnering with to complete this activity _____
- b) The State/Territory certifies that it has pre-service (prior to initial service) or orientation (period of up to 3 months from when service started) and ongoing training requirements, appropriate to the provider setting that address each of the requirements relating to the topic areas listed above. ACF expects these trainings will be part of a broader systematic approach and progression of professional development (as described in Section 6) within a State/Territory that will result in opportunities for child care providers to accumulate knowledge, competencies and credits toward eventual completion of a professional certification or higher education. The law does not specify a specific number of training or education hours but States and Territories are encouraged to consult with *Caring for our Children* for best practices and recommended time needed to address these training requirements.
- ☐ Yes. The State/Territory certifies that it has pre-service or orientation and ongoing training requirements appropriate to the provider setting that address each of the requirements relating to the topics listed above. Describe, including the minimum number of annual preservice/orientation and ongoing training or education hours required to meet these health and safety requirements _____
 - ☐ X No. If no, the State/Territory must provide a State/Territory-specific **implementation plan** for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and

paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

- Overall Target Completion Date (no later than September 30, 2016) _____
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- Tasks/Activities – What specific steps will you take to complete the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) _____
 - Projected start date for each activity _____
 - Projected end date for each activity _____
 - Agency – Who is responsible for completion of this activity _____
 - Partners – Who is the responsible agency partnering with to complete this activity _____

5.1.7 Does the State/Territory have health and safety requirements for any of the following optional areas?

☒ X Nutrition. Describe:

Child Development Homes: Regular meals and midmorning and midafternoon snacks shall be provided which are well-balanced, nourishing, and in appropriate amounts as defined by the USDA Child and Adult Care Food Program. Children may bring food to the child development home for their own consumption, but shall not be required to provide their own food.

Child Care Centers: Nutritionally balanced meals or snacks. The center shall serve each child a full, nutritionally balanced meal or snack as defined by the USDA Child and Adult Care Food Program (CACFP) guidelines and shall ensure that staff provide supervision at the table during snacks and meals.

Children remaining at the center two hours or longer shall be offered food at intervals of not less than two hours or more than three hours apart unless the child is asleep

Menu planning. The center shall follow the minimum CACFP menu patterns for meals and snacks and serving sizes for children aged infant to 13 years. Menus shall be planned at least one week in advance, made available to parents, and kept on file at the center. Substitutions in the menu, including substitutions made for infants, shall be noted and kept on file. Foods with a high incident rate of causing choking in young children shall be avoided or modified. Provisions of this subrule notwithstanding, exceptions shall be allowed for special diets because of medical reasons in accordance with the child's needs and written instructions of a licensed physician or health care provider.

Feeding of children under two years of age. a. All children under 12 months of age shall be fed on demand, unless the parent provides other written instructions. Meals and snacks provided by the center shall follow the CACFP infant menu patterns. Foods shall be appropriate for the infant's nutritional requirements and eating abilities. Menu patterns may be modified according to written instructions from the parent, physician or health care provider. Special formulas prescribed by a physician or health care provider shall be given to a child who has a feeding problem. b. All children under six months of age shall be held or placed in a sitting-up position sufficient to prevent aspiration during feeding. No bottles shall be propped for children of any age. A child shall not be placed in a crib with a bottle or left sleeping with a bottle. Spoon feeding shall be adapted to the developmental capabilities of the child. c. Single-service, ready-to-feed formulas, concentrated or powdered formula following the manufacturer's instructions or breast milk shall be used for children 12 months of age and younger unless otherwise ordered by a parent or physician. d. Whole milk for children under age two who are not on formula or breast milk unless otherwise directed by a physician. e. Cleaned and sanitized bottles and nipples shall be used for bottles prepared on site. Prepared bottles shall be kept under refrigeration when not in use

Food preparation, storage, and sanitation. Centers shall ensure that food preparation and storage procedures are consistent with the recommendations of

the National Health and Safety Performance Standards and provide: a. Sufficient refrigeration appropriate to the perishable food to prevent spoilage or the growth of bacteria. b. Sanitary and safe methods in food preparation, serving, and storage sufficient to prevent the transmission of disease, infestation of insects and rodents, and the spoilage of food. Staff preparing food who have injuries on their hands shall wear protective gloves. Staff serving food shall have clean hands or wear protective gloves and use clean serving utensils. c. Sanitary methods for dish-washing techniques sufficient to prevent the transmission of disease. d. Sanitary methods for garbage disposal sufficient to prevent the transmission of disease and infestation of insects and rodents.

- ☒ X Access to physical activity. Describe:

Child Development Homes Activity program. There shall be an activity program which promotes self-esteem and exploration and includes: a. Active play. b. Quiet play. c. Activities for large muscle development. d. Activities for small muscle development. e. Play equipment and materials in a safe condition, for both indoor and outdoor activities which are developmentally appropriate for the ages and number of children present.

Child Care Centers: Develop a curriculum or program structure that uses developmentally appropriate practices and an activity program appropriate to the developmental level and needs of the children.

Activities. The center shall have a written curriculum or program structure that uses developmentally appropriate practices and a written program of activities planned according to the developmental level of the children. The center shall post a schedule of the program in a visible place. The child care program shall complement but not duplicate the school curriculum. The program shall be designed to provide children with: a. A curriculum or program of activities that promotes self-esteem and positive self-image; social interaction; self-expression and communication skills; creative expression; and problem-solving skills. b. A balance of active and quiet activities; individual and group activities; indoor and outdoor activities; and staff-initiated and child-initiated activities. c. Activities which promote both gross and fine motor development. d. Experiences in harmony with the ethnic and cultural backgrounds of the children. e. A supervised nap or quiet time for all children under

the age of six not enrolled in school who are present at the center for five or more hours.

Caring for children with special needs. Describe: 109.12(3) Policies for children requiring special accommodations. Reasonable accommodations, based on the special needs of the child, shall be made in providing care to a child with a disability. Accommodation can be a specific treatment prescribed by a professional or a parent, or a modification of equipment, or removal of physical barriers. The accommodation shall be recorded in the child's file.

109.12(4) Play equipment, materials and furniture. The center shall provide sufficient and safe indoor play equipment, materials, and furniture that conform with the standards or recommendations of the Consumer Product Safety Commission or the American Society for Testing and Materials for juvenile products. Play equipment, materials, and furniture shall meet the developmental, activity, and special needs of the children.

- ☐ Other subject areas determined by the State/Territory to be necessary to promote child development or to protect children's health and safety. Describe:

5.1.8 States and Territories have the option to exempt relatives (as defined in CCDF regulations as grandparents, great-grandparents, siblings if living in a separate residence, aunts, and uncles, 98.41(A)(ii)(A)) from these CCDF health and safety requirements. Does the State/Territory exempt relatives from the requirement to receive pre-service or orientation health and safety training on any or all of the listed topics?

- ☐ Yes, relatives are exempt from all health and safety training requirements. If the State/Territory exempts relatives from all health and safety training requirements, describe how the State ensures the health and safety of children in relative care.
- _____
- ☐ Yes, relatives are exempt from some health and safety training requirements. If the State/Territory exempts relatives from some health and safety training requirements, describe which requirements are exempt and include how the State/Territory ensures the health and safety of children in relative care. _____
- ☐ No, relatives are not exempt from health and safety training requirements.

5.2 Monitoring and Enforcement Policies and Practices

5.2.1 The State/Territory certifies that the State/Territory shall have in effect policies and practices to ensure that providers for children receiving assistance and their facilities comply with applicable State or local licensing and health and safety requirements. (658E(c)(2)(J))

X Yes. The State/Territory certifies that it has policies and practices to ensure compliance with applicable licensing and health and safety requirements for providers receiving CCDF and their facilities. List the policy citation within the Lead Agency's rules: Centers Pre-license visit: 441—109.3(237A) Inspection and evaluation. The department shall conduct an on-site visit in order to make a licensing recommendation for all initial and renewal applications for licensure and shall determine compliance with licensing standards imposed by licensing laws and these rules when a complaint is received.

☐ X No. If no, the State/Territory must provide a State/Territory-specific **implementation plan** for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report

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- Tasks/Activities – What specific steps will you take to complete the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) _____
 - Projected start date for each activity _____
 - Projected end date for each activity _____
 - Agency – Who is responsible for completion of this activity _____
 - Partners – Who is the responsible agency partnering with to complete this activity _____

- 5.2.2 The CCDBG Act of 2014 added the following provisions for enforcement of licensing which must be in effect no later than November 19, 2016 for all providers who serve children receiving CCDF (with the option to exempt relatives).

The State/Territory certifies:

- a) **Licensing Inspectors** - It will have policies and practices that ensure that individuals who are hired as licensing inspectors in the State/Territory are qualified to inspect those child care providers and facilities and have received training in related health and safety requirements, and are trained in all aspects of the State's licensure requirements. (658E(c)(2)(K)(i)(I))
- b) **Inspections for Licensed CCDF Providers** - It will require licensing inspectors to perform inspections, with not less than one prelicensure inspection, for compliance with health, safety, and fire standards, of each such child care provider and facility in the State/Territory. It will require licensing to perform not less than annually, one unannounced inspection of licensed CCDF providers for compliance with all child care licensing standards, which shall include an inspection for compliance with health, safety, and fire standards (inspectors may inspect for compliance with all 3 standards at the same time. (658E(c)(2)(K)(i)(II))
- c) **Inspections for License-Exempt CCDF Providers (except those serving relatives)** – It will have policies and practices that require licensing inspectors (or qualified monitors designated by the lead agency) of child care providers and facilities to perform an annual monitoring visit of each license-exempt CCDF provider (unless the provider is described in section (658P(6)(B)). (658E(c)(2)(K)(ii)(IV))
- d) **Ratio of Licensing Inspectors** – It will have policies and practices that require the ratio of licensing inspectors to such child care providers and facilities in the State/Territory to be maintained at a level sufficient to enable the State to conduct inspections of such child care providers and facilities on a timely basis in accordance with Federal, State, and local law. (658E(c)(2)(K)(i)(III))
- e) **Child Abuse and Neglect Reporting** – That child abuse reporting requirements are in place and comply with section of the Child Abuse Prevention and Treatment Act (42 U.S.C. 5106a(b)(2)(B)(i)) (658E(c)(2)(L))
 - ☐ Yes. Fully implemented and meeting all Federal requirements outlined above.
List the Lead Agency's policy citation(s): _____
 - ☒ **X** No. If no, the State/Territory must provide a State/Territory-specific **implementation plan** for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and

target completion date (no later than November 19, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

- Overall Target Completion Date (no later than November 19, 2016) _____
- Unmet Requirement(s) – Identify the requirement(s) that is not fully complete or implemented _____
- Current Status – Describe the State/Territory’s status toward completion for any requirement(s) not fully implemented (not yet started, in progress, partially completed, substantially completed, other) _____
- Tasks/Activities – What specific steps will you take to complete the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) _____
 - Projected start date for each activity _____
 - Projected end date for each activity _____
 - Agency – Who is responsible for completion of this activity _____
 - Partners – Who is the responsible agency partnering with to complete this activity _____

5.2.3 Does the State/Territory exempt relatives from these inspection requirements?

States and Territories have the option to exempt relatives (as defined in CCDF regulations as grandparents, great-grandparents, siblings if living in a separate residence, aunts, and uncles, 98.41(A)(ii)(A)) from CCDF health and safety requirements, including inspections. Note this exception only applies if the individual cares ONLY for relative children.

- ☐ Yes.
- ☐ No. If no, describe the State/Territory’s policy for inspecting relatives _____

5.3 Criminal Background Checks

The CCDBG Act of 2014 added new requirements for States and Territories receiving CCDF funds for conducting criminal background checks on child care staff members and prospective staff members of child care providers. States and Territories are required to have requirements, policies, and procedures in place to conduct criminal background checks for staff members of child care providers (*other than relatives* that are licensed, regulated or registered under State/Territory law or receive CCDF funds). Background check requirements apply to any staff member who is employed by a child care provider for compensation or whose activities involve

the care or supervision of children or unsupervised access to children. For family child care homes, this includes the caregiver requesting a check of him/herself, as well as any other individuals in the household that may have unsupervised access to children. These provisions must be in place *no later than September 30, 2017*.

States and Territories must also have licensing and regulatory requirements, not limited to CCDF, that prohibit the employment of child care staff members who refuse or do not pass the criminal background check. A child care provider is ineligible for CCDF funds if the provider employs an ineligible child care staff member.

The CCDBG Act of 2014 specifies what a comprehensive criminal background check includes and a child care provider must submit a request to the appropriate State/Territory agency for a criminal background check for each child care staff member, including prospective child care staff members at least once every 5 years. A criminal background check must include a search of: State criminal and sex offender registry in the State where the staff member resides and each State where the staff member has resided over the past 5 years; State child abuse and neglect registry in the State where the staff member resides and each State where the staff member has resided over the past 5 years, National Crime Information Center (run by the FBI); FBI fingerprint check using Next Generation Identification ; and National Sex Offender Registry.

Child care staff members cannot be employed by a provider receiving CCDF if they refuse a background check; make materially false statements in connection with the background check; are registered or required to be registered on the State or National Sex Offender Registry; have been convicted of a felony consisting of: murder, child abuse or neglect, crimes against children, spousal abuse, crime involving rape or sexual assault, kidnapping, arson, physical assault, or subject to an individual review, at the State's option, a drug-related offense committed during the preceding 5 years; or have been convicted of a violent misdemeanor committed as an adult against a child. The State/Territory may conduct an individualized review of staff members who have received felony criminal convictions for drug-use to determine eligibility for employment.

Timeliness of background checks - The State/Territory must conduct the background checks as quickly as possible and shall not exceed 45 days after the child care provider submitted the request. The State/Territory shall provide the results of the background check in a statement that indicates whether the staff member is eligible or ineligible, without revealing specific disqualifying information. If the staff member is ineligible, the State/Territory will provide information about each disqualifying crime to the staff member.

Fees for background checks – Fees that a State/Territory may charge for the costs of processing applications and administering a criminal background check may not exceed actual costs to the State/Territory for processing and administration.

Transparency – The State/Territory must ensure that policies and procedures for conducting criminal background checks are published on the State/Territory’s consumer education website (also see section 2.3) or other publicly available venue.

Appeals process – The State/Territory shall have a process for a child care staff member to appeal the results of their background check to challenge the accuracy and completeness. The fees charged by a State or Territory for completing the background checks may not exceed the actual cost of processing and administration. The State/Territory must publish the background check policies and procedures on the State/Territory and local lead agency websites. If there is no website, then the information must be made publicly available in another venue.

Privacy considerations - Lead Agency may not publicly release the results of individual background checks. They may release aggregated data by crime as long as the data does not include personally identifiable information.

5.3.1 Describe the status of the State/Territory’s requirements, policies, and procedures for criminal background checks for child care staff members and child care providers.

X Fully implemented and meeting all Federal requirements outlined above. List the policy citation within the Lead Agency’s rules: 237A.5, 441 IAC 109.6(6), 441 IAC 110.7(3) and describe the policies and procedures for criminal background checks using 5.3.2 through 5.3.9 below.

- ☐ X **Not implemented**. The State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2017). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

- Overall Target Completion Date (no later than September 30, 2017) _____
- Unmet Requirement(s) – Identify the requirement(s) that is not fully complete or implemented _____
- Current Status – Describe the State/Territory’s status toward completion for any requirement(s) not fully implemented (not yet started, in progress, partially completed, substantially completed, other) _____
- Tasks/Activities – What specific steps will you take to complete the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) _____

- Projected start date for each activity _____
- Projected end date for each activity _____
- Agency – Who is responsible for completion of this activity _____
- Partners – Who is the responsible agency partnering with to complete this activity _____

5.3.2 Describe the process and procedures for conducting background checks in a timely manner, including which agency/entity is responsible and how the Lead Agency ensures that background checks performed by a 3rd party meet the requirements, protecting the privacy of child care staff members, and appealing the results of background checks. The Lead Agency conducts the state background checks every 2 years and FBI fingerprint-based checks at a minimum every 4 years and when the Lead Agency or the provider becomes aware of any possible transgressions by staff. The checks are processed within XX days after a complete request and acceptable print card are submitted ...

APPEALS:

A provider has the right to file an appeal if they disagree with any Department decision. They do not have to pay to file an appeal. The provider must appeal in writing by doing one of the following:

- Complete an appeal electronically at <https://dhssecure.dhs.state.ia.us/forms/>, or
- Write a letter telling us why they think a decision is wrong, or Fill out an Appeal and Request for Hearing form. They can get this form at any county DHS office.

The provider then sends or takes the appeal to the Department of Human Services, Appeals Section, 5th Floor, 1305 E Walnut Street, Des Moines, Iowa 50319-0114. If the provider needs help filing an appeal, they may ask their county DHS office for assistance. The provider must file an appeal:

- Within 30 calendar days of the date of a decision or
- Before the date a decision goes into effect.

If they file an appeal more than 30 but less than 90 calendar days from the date of a decision, they must tell us why their appeal is being filed late. If the provider has a good reason for filing the appeal late, the Appeals Section will decide if they can get a hearing. If the provider files an appeal 90 days after the date of a decision, a hearing cannot be given. The provider may keep child care benefits until an appeal is final or through the end of their certification period if they file an appeal:

- Within 10 calendar days of the date of a decision or
- Before the date a decision goes into effect

Any benefits received while the appeal is being decided may have to be paid back if the Department's action is correct. If the provider is granted a hearing before an administrative law judge and does not agree with the final decision of the hearing, he or she may request a rehearing. The director of the department of human services determines if a rehearing will be granted. If a director's review is requested, and the individual is dissatisfied with the final decision, the individual may file for judicial review in district court.

5.3.3 Describe how the State/Territory is helping other States process background checks, including which agency/entity is responsible for working with other states - No current policies.

5.3.4 Does the State/Territory have a review process for individuals disqualified due to a felony drug offense to determine if that individual is still eligible for employment?

☒ X Yes. Describe. The Lead Agency has a record check evaluation process that....

☐ No

5.3.5 Does the State/Territory disqualify child care staff members based on their conviction for other crimes not specifically listed above?

☐ Yes. Describe. _____

☐ No

5.3.6 Does your State State/Territory exempt relatives (defined in CCDF regulations as grandparents, great-grandparents, siblings if living in a separate residence, aunts, and uncles, 98.41(A)(ii)(A)) from background checks?

☐ Yes, relatives are exempt from all of the background check requirements.

☐ Yes, relatives are exempt from some of the background check requirements.
Describe. _____

☐ No, relatives are not exempt from background checks.

5.3.7 Describe how fees charged for completing the background checks do not exceed the actual cost of processing and administration, including how the State State/Territory ensures that 3rd party vendors or contractors do not charge fees that exceed the actual cost of processing and administration, if applicable. Lead Agencies can report that no fees are charged if applicable.

Costs of the state background checks are \$15.00

Costs of the federal background checks range from \$15.00 to \$27.00.

Child care centers are responsible for all costs associated with both the state and federal checks.

Costs for the state background checks and FBI fingerprint-based in Child Development Homes are the responsibility of the Lead Agency... The Lead Agency does not obtain a fee from providers in excess of that charged by state DCI and FBI.

5.3.8 Describe how background check policies and procedures are published on the State/Territory consumer education website or made publicly available on another venue ADDRESSED IN IMPLEMENTATION PLAN

5.3.9 Does the Lead Agency release aggregated data by crime?

☐ Yes. List types of crime included in the aggregated data _____

☒ X No

6 Recruit and Retain a Qualified and Effective Child Care Workforce

Teacher-child interactions and relationships, intentional strategies to engage children and their parents, and use of curriculum and assessment to inform practices with children are key components of high quality child care. These require a competent, skilled, and stable workforce. Research has shown that specialized training and education, positive and well-organized work environments and adequate compensation promote teacher stability and effectiveness with young children in child care. In addition, professional development strategies that emphasize on-site mentoring and coaching of teachers have emerged as promising to change practices with children and families.

The CCDBG Act of 2014 requires States and Territories to establish professional development and training requirements in key areas such as health and safety, early learning guidelines, responding to challenging behavior and engaging families. States and Territories are required to offer ongoing annual training and to establish a progression of professional development opportunities to improve knowledge and skills of CCDF providers. (658E(c)(2)(G)) An example of how a State/Territory might address this is to establish a system or framework of professional development that includes professional standards, a “career ladder” that allows an individual to move from introductory training to advance level education, including obtaining a credential or post-secondary degree. Professional development should be designed in a manner that builds and is cumulative to result in higher credentials, certification or advanced degrees recognized by the State/Territory as demonstrating mastery in their profession. Training and education supporting professional development is also one of the options States and Territories have for investing their CCDF quality funds. (658G(b)(1)) Responsive, well-qualified adult caregivers are one of the most important factors in children’s development and learning in child care settings. ACF strongly encourages States and Territories to link CCDF health and safety trainings (see Section 5) and child development trainings and education to this broader professional development framework as the foundation for building a knowledgeable early childhood education workforce.

Questions related to requirements for recruiting and retaining a qualified and effective child care workforce have been consolidated into Section 6.

6.1 Training and Professional Development Requirements

The CCDBG Act of 2014 added a requirement that the State/Territory develop training and professional development requirements designed to enable child care providers to promote the social, emotional, physical and cognitive development of children and to improve the knowledge and skills of the child care workforce. Such requirements shall be applicable to child care providers caring for children receiving CCDF. (658E(c)(2)(G))

The State/Territory also must develop and implement strategies to strengthen the business practices of child care providers to expand the supply and improve the quality of child care services. (658E(c)(2)(V))

For purposes of this section, the term professional development is inclusive of credit bearing coursework, postsecondary degree programs, and technical assistance (targeted assistance such as mentoring, coaching or consultation) activities. Health and safety topics that require renewal of a credential or certification should be considered continuing education unit trainings.

- 6.1.1 Describe the status of the State/Territory's professional development system or framework, including training and professional development requirements to enable child care providers to promote the social, emotional, physical, and cognitive development of children and to improve the knowledge and skills of the child care workforce.

The Lead Agency assures that the State/Territory's training and professional development requirements:

- a) Provide ongoing training and professional development, provide for a progression of professional development reflecting research and best practice to meet the developmental needs of participating children and improve the quality and stability of the child care workforce (such as allows an individual to build on entry- and mid-level training and education both in terms of the skills and knowledge they attain but also in terms of credit that leads toward a higher level credential or certification, including articulation agreements)
- b) Are developed in consultation with the State Advisory Council on Early Childhood Education and Care or other state- or state-designated cross-agency body if no SAC that addresses training, professional development and education of child care providers and staff.
- c) Incorporates knowledge and application of the State/Territory's early learning and developmental guidelines (where applicable), the State/Territory's health and safety

standards (as described in section 5), and incorporates social-emotional behavior intervention models, which may include positive behavior intervention and support models (as described in Section 2)

- d) Are accessible to providers supported through Indian tribes or tribal organizations receiving CCDF
 - e) Appropriate, to the extent practicable, for child care providers caring for children receiving child care subsidies, including children of different age groups, English learners, children with disabilities, and Native Americans, including Indians and Native Hawaiians.
- ☐ Fully implemented and meeting all Federal requirements outlined above. Describe using 6.1.2 through 6.1.6 below.
- ☐ Not implemented. The State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.
- Overall Target Completion Date (no later than September 30, 2016) _____
 - Unmet Requirement(s) – Identify the requirement(s) that is not fully complete or implemented _____
 - Current Status – Describe the State/Territory’s status toward completion for any requirement(s) not fully implemented (not yet started, in progress, partially completed, substantially completed, other) _____
 - Tasks/Activities – What specific steps will you take to complete the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) _____
 - Projected start date for each activity _____
 - Projected end date for each activity _____
 - Agency – Who is responsible for completion of this activity _____
 - Partners – Who is the responsible agency partnering with to complete this activity _____

- 6.1.2 Describe how the State/Territory provides ongoing training and professional development that provides for a progression of professional development reflecting research and best practice to meet the developmental needs of participating children and improve the quality and stability of the child care workforce. Use the checkboxes below to identify and describe the elements of the progression of professional development.
- ☐ State/Territory professional standards and competencies. Describe _____
 - ☐ Career ladder or lattice. Describe _____
 - ☐ Articulation agreements between two- and four-year postsecondary early childhood education or degree programs. Describe _____
 - ☐ Workforce data, including recruitment, retention, registries or other documentation, and compensation information. Describe _____
 - ☐ Advisory structure that provides recommendations for the development, revision, and implementation of the professional development system or framework. Describe _____
 - ☐ Continuing education unit trainings and credit-bearing professional development. Describe _____
 - ☐ Other. Describe _____
- 6.1.3 Describe how the State/Territory developed its training and professional development requirements in consultation with the State Advisory Council on Early Childhood Education and Care (if applicable) or other state or state-designated cross-agency body if no SAC _____
- 6.1.4 Describe how the State/Territory incorporates knowledge and application of the State's early learning and developmental guidelines (where applicable), the State/Territory's health and safety standards (as described in section 5), and incorporates social-emotional behavior intervention models, which may include positive behavior intervention and support models (as described in Section 2) into its training and professional development requirements _____
- 6.1.5 Describe how the State's training and professional development requirements are accessible to providers supported through Indian tribes or tribal organizations receiving CCDF (as applicable)
- 6.1.6 Describe how the State/Territory's training and professional development requirements are appropriate, to the extent practicable, for child care providers caring for children receiving child care subsidies, including children of different age groups, English learners, children with disabilities, and Native Americans, including Indians and Native Hawaiians. _____
- 6.1.7 Describe the strategies the State/Territory uses to recruit and retain providers who will serve eligible children. _____

6.1.8 Describe how the State/Territory will recruit providers with limited English proficiency, or who will serve and be available for families with limited English proficiency. _____

6.1.9 How will the Lead Agency overcome language barriers to serve providers with limited English proficiency? Check the strategies, if any, that your State/Territory has chosen to implement.

- ☐ X Informational materials in non-English languages
- ☐ X Training and technical assistance in non-English languages
- ☐ X CCDF health and safety requirements in non-English languages
- ☐ X Provider contracts or agreements in non-English languages
- ☐ Website in non-English languages
- ☐ X Bilingual caseworkers or translators available
- ☐ Collect information to evaluate on-going need, recruit, or train a culturally or linguistically diverse workforce
- ☐ Other _____
- ☐ None

If the Lead Agency checked any option above related to providing information or services in other non-English languages, please list the primary languages offered (top 3) or specify that the State has the ability to have translation/interpretation in all primary and secondary languages Spanish

6.1.10 The State/Territory must use CCDF for activities to improve the quality or availability of child care, including training and technical assistance to providers on identifying and serving homeless children and families. (658E(c)(3)(B)(i) Describe the status of the State/Territory's training and technical assistance to providers on identifying and serving homeless children and their families (connects to Section 3.2.2).

- ☐ Yes. The State certifies that no later than September 30, 2016 it will provide training and technical assistance to providers on identifying and serving homeless children and their families. Describe _____
- ☒ X No. The State/Territory must provide a State/Territory-specific **implementation plan** for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and

descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

- Overall Target Completion Date (no later than September 30, 2016) _____
- Unmet Requirement(s) – Identify the requirement(s) that is not fully complete or implemented _____
- Current Status – Describe the State/Territory’s status toward completion for any requirement(s) not fully implemented (not yet started, in progress, partially completed, substantially completed, other) _____
- Tasks/Activities – What specific steps will you take to complete the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) _____
 - Projected start date for each activity _____
 - Projected end date for each activity _____
 - Agency – Who is responsible for completion of this activity _____
 - Partners – Who is the responsible agency partnering with to complete this activity _____

6.2 Supporting Training and Professional Development of the Child Care Workforce with CCDF Quality Funds

States and Territories may use the quality set-aside as discussed in section 7 to support the training and professional development of the child care workforce.

6.2.1 Does the State/Territory fund the training and professional development of the child care workforce?

- ☐ Yes. If yes,
- a) Describe the measures relevant to this use of funds that the State/Territory will use to evaluate the State/Territory’s progress in improving the quality of child care programs and services in the State/Territory _____
 - b) Indicate which funds will be used for this activity (check all that apply)
 - ☐ CCDF funds. Describe _____
 - ☐ Other funds. Describe _____
 - c) Check which content is included in training and professional development activities. Check all that apply.

- ☐ Promoting the social, emotional, physical, and cognitive development of children, including those related to nutrition and physical activity, using scientifically-based, developmentally-appropriate and age-appropriate strategies as required in 6.1.1c. Describe _____
 - ☐ Implementing behavior management strategies, including positive behavior interventions and support models that promote positive social and emotional development and reduce challenging behaviors, including reducing expulsions of preschool-aged children for such behaviors (see also Section 2). Describe _____
 - ☐ Engaging parents and families in culturally and linguistically appropriate ways to expand their knowledge, skills, and capacity to become meaningful partners in supporting their children's positive development. Describe _____
 - ☐ Developmentally appropriate, culturally and linguistically responsive instruction and evidence-based curricula, and learning environments that are aligned with the State/Territory Early Learning and Development Standards, for at least the year prior to kindergarten entry. Describe _____
 - ☐ On-site or accessible comprehensive services for children and community partnerships that promote families' access to services that support their children's learning and development. Describe _____
 - ☐ Using data to guide program evaluation to ensure continuous improvement. Describe _____
 - ☐ Caring for children of families in geographic areas with significant concentrations of poverty and unemployment. Describe _____
 - ☐ Caring for children with disabilities and developmental delays. Describe _____
 - ☐ Supporting positive development of school-age children. Describe _____
 - ☐ Other. Describe _____
- d) Check how the State/Territory connects child care providers with available Federal and State/Territory financial aid, or other resources for pursuing postsecondary education relevant for the early childhood and school-age workforce. Check all that apply.

- ☐ Coaches, mentors, consultants, or other specialists available to support access to postsecondary training including financial aid and academic counseling
- ☐ State/Territory-wide, coordinated, and easily accessible clearinghouse (i.e. online calendar or listing of opportunities) of relevant postsecondary education opportunities
- ☐ Financial awards (such as scholarships, grants, loans, reimbursement for expenses) from State/Territory for completion of postsecondary education
- ☐ Other. Describe _____

☐ No

6.2.2 Does the State/Territory require a specific number of annual training hours for child care providers caring for children receiving CCDF subsidies and in particular areas? States and Territories are encouraged to consult with *Caring for our Children* for best practices and recommended time needed to address training hour requirements.

☐ X Yes. If yes, describe:

a) Licensed Center-Based Care

- 1) Number of pre-service hours and any required areas/content None
- 2) Number of on-going hours and any required areas/content

ALL STAFF:

Within first 6 months of employment

Mandatory Reporter (2 hours)

Universal Precautions and Infectious Disease (1 hour)

STAFF OVER 20 HOURS AND CENTER DIRECTORS:

During 1st full year of employment:

- 1st AID/CPR
- 10 contact hours of training from one or more of specific content areas (MCART, 1st AID/CPR do not count towards total)
 - Planning a safe, healthy learning environment (includes nutrition).
 - Steps to advance children's physical and intellectual development.
 - Positive ways to support children's social and emotional development (includes guidance and discipline).

- Strategies to establish productive relationships with families (includes communication skills and cross-cultural competence).
 - Strategies to manage an effective program operation (includes business practices).
 - Maintaining a commitment to professionalism.
 - Observing and recording children's behavior.
 - Principles of child growth and development.
- At least four hours of the ten contact hours of training shall be received in a group setting
- Center directors and on-site supervisors shall receive all ten hours of training in a group setting
- Staff who have completed a comprehensive training package of at least ten contact hours offered through a child care resource and referral agency or community college within six months prior to initial employment shall have the first year's ten contact hours of training waived.

Following 1st full year of employment:

- Maintain current certification for Iowa's training for the mandatory reporting of child abuse; infant, child and adult CPR; and infant, child and adult first aid.
- Receive six contact hours of training annually from one or more of the content areas
- Center directors and on-site supervisors shall receive eight contact hours of training annually from one or more of the content areas. At least four of the eight contact hours shall be in a group setting.

STAFF UNDER 20 HOURS:

During their first year of employment

- Five contact hours of training from one or more of the following topical areas: child development, guidance and discipline, developmentally appropriate practices, nutrition, health and safety, communication skills, professionalism, business practices, and cross-cultural competence.
- At least two of the five contact hours shall be in a sponsored group setting
- Staff who have completed a comprehensive training package of at least ten contact hours offered through a child care resource and referral agency or community college within six months prior to initial employment shall have the five contact hours required in the first year waived.

Following their first year of employment:

- Maintain current certification for Iowa's training for mandatory reporting of child abuse.
- Receive four contact hours of training annually from one or more of the following topical areas: child development, guidance and discipline, developmentally appropriate practices, nutrition, health and safety, communication skills, professionalism, business practices, and cross-cultural competence.
- At least two of the four contact hours shall be in a sponsored group setting.

Summer Only Programs

- Two hours of Iowa's training for mandatory reporting of child abuse.
- At least one hour of training regarding universal precautions and infectious disease control.
- 1 staff person on duty when children are present have CPR/1st Aid

b) Licensed Group Child Care Homes

- 1) Number of pre-service hours and any required areas/content None
- 2) Number of on-going hours and any required areas/content

During the first 3 months of registration:

- 1st Aid/CPR (must remain current)
- Mandatory Reporter (and every 5 years thereafter)

During the 1st year of registration, at least 12 hours of training in specific content areas. At least 6 hours in group setting. (MCART, 1st aid/CPR do not count in the 12 hours)

During the 2nd year of registration and each succeeding year, a minimum of 12 hours of training in specific content areas. (MCART, 1st aid/CPR do not count in the 12 hours)

Content areas:

- Planning a safe, healthy learning environment (includes nutrition).
- Steps to advance children's physical and intellectual development.
- Positive ways to support children's social and emotional development (includes guidance and discipline).
- Strategies to establish productive relationships with families (includes communication skills and cross-cultural competence).
- Strategies to manage an effective program operation (includes business practices).
- Maintaining a commitment to professionalism.
- Observing and recording children's behavior.
- Principles of child growth and development.

c) Licensed Family Child Care Provider

- 1) Number of pre-service hours and any required areas/content None
- 2) Number of on-going hours and any required areas/content

During the first 3 months of registration:

- 1st Aid/CPR (must remain current)
- Mandatory Reporter (and every 5 years thereafter)

During the 1st year of registration, at least 12 hours of training in specific content areas. At least 6 hours in group setting. (MCART, 1st aid/CPR do not count in the 12 hours)

During the 2nd year of registration and each succeeding year, a minimum of 12 hours of training in specific content areas. (MCART, 1st aid/CPR do not count in the 12 hours)

Content areas:

- Planning a safe, healthy learning environment (includes nutrition).
- Steps to advance children's physical and intellectual development.
- Positive ways to support children's social and emotional development (includes guidance and discipline).
- Strategies to establish productive relationships with families (includes communication skills and cross-cultural competence).
- Strategies to manage an effective program operation (includes business practices).
- Maintaining a commitment to professionalism.
- Observing and recording children's behavior.
- Principles of child growth and development.

d) Any other eligible CCDF provider

- 1) Number of pre-service hours and any required areas/content None
- 2) Number of on-going hours and any required areas/content

Non-registered, license-exempt - Must have a valid first-aid and cardiopulmonary resuscitation (CPR) certificate or a first-aid certificate, which includes rescue breathing.

☐ No

6.2.3 Describe the status of the State/Territory's policies and practices to strengthen provider's business practices.

- ☐ X Fully implemented. Describe the State strategies including training, education, and technical assistance to strengthen provider's business practices. This may include, but is not limited to, such practices related to fiscal management,

budgeting, record-keeping, hiring, developing, and retaining qualified staff, risk management, community relationships, marketing and public relations, and parent-provider communications, including who delivers the training, education and/or technical assistance .

- ☐ Not implemented. The State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.
- Overall Target Completion Date (no later than September 30, 2016) _____
 - Unmet Requirement(s) – Identify the requirement(s) that is not fully complete or implemented _____
 - Current Status – Describe the State/Territory’s status toward completion for any requirement(s) not fully implemented (not yet started, in progress, partially completed, substantially completed, other) _____
 - Tasks/Activities – What specific steps will you take to complete the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) _____
 - Projected start date for each activity _____
 - Projected end date for each activity _____
 - Agency – Who is responsible for completion of this activity _____
 - Partners – Who is the responsible agency partnering with to complete this activity _____

6.3 Early Learning and Developmental Guidelines

The CCDBG Act of 2014 added a requirement that the State/Territory will develop, maintain, or implement early learning and developmental guidelines that are appropriate for children in a forward progression from birth to kindergarten entry (i.e., birth-to-three, three-to-five, or birth-to-five), describing what such children should know and be able to do, and covering the essential domains of early childhood development for use State/Territory wide by child care providers. (658E(c)(2)(T)) States and Territories may use the quality set-aside as discussed in section 7 to improve on the development or implementation of early learning and development guidelines.

6.3.1 Describe the status of the State/Territory's early learning and development guidelines appropriate for children from birth to kindergarten entry.

☐ X The State/Territory assures that the early learning and development guidelines are:

- Research-based, developmentally appropriate, and aligned with entry to kindergarten
- Implemented in consultation with the State educational agency and the State Advisory Council or other state- or state-designated cross-agency body if no SAC
- Updated as determined by the State. List the date or frequency Revised in 2013

☐ X Fully implemented and meeting all Federal requirements outlined above. List the Lead Agency's policy citation(s) and describe using 6.3.2 through 6.3.4 below

☐ Not implemented. The State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

- Overall Target Completion Date (no later than September 30, 2016) _____
- Unmet Requirement(s) – Identify the requirement(s) that is not fully complete or implemented _____
- Current Status – Describe the State/Territory's status toward completion for any requirement(s) not fully implemented (not yet started, in progress, partially completed, substantially completed, other) _____
- Tasks/Activities – What specific steps will you take to complete the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) _____
 - Projected start date for each activity _____
 - Projected end date for each activity _____
 - Agency – Who is responsible for completion of this activity _____
 - Partners – Who is the responsible agency partnering with to complete this activity _____

6.3.2 Check for which age group(s) the State/Territory has established early learning and development guidelines:

☐ Birth-to-three

☐ Three-to-Five

☒ X Birth-to-Five

☐ Five and older (check if State/Territory has standards for five and older that are different from k-12 school standards). Describe

☐ Other. Describe _____

Please provide a link to the State/Territory's early learning and development guidelines.

http://www.state.ia.us/earlychildhood/files/early_learning_standarda/IELS_2013.pdf

6.3.3 Does the State/Territory use CCDF quality funds to improve on the development or implementation of early learning and development guidelines by providing technical assistance to child care providers to enhance children's cognitive, physical, social and emotional development and support children's overall well-being?

☐ X Yes, the State/Territory has a system of technical assistance *operating State/Territory-wide*

☐ Yes, the State/Territory has a system of technical assistance *operating as a pilot or in a few localities* but not State/Territory-wide

☐ No, but the State/Territory is in the development phase

☐ No, the State/Territory has no plans for development

a) If yes, check all that apply to the technical assistance and describe.

☒ X Child care providers are supported in developing and implementing curriculum/learning activities based on the State's/Territory's *early learning and development guidelines*. Describe CCR&R providing summary re: ccc's effort

☐ The technical assistance is linked to the State's/Territory's *quality rating and improvement system*. Describe _____

☐ Child care providers working with *infants and/or toddlers* have access to the technical assistance for developing and implementing early learning and development guidelines. Describe _____

- ☐ Child care providers working with *preschool-age children* have access to the technical assistance for developing and implementing early learning and development guidelines. Describe _____
- ☐ Child care providers working with school-age children have access to the technical assistance for developing and implementing early learning and development guidelines. Describe _____

b) Indicate which funds are used for this activity (check all that apply)

- ☐ X CCDF funds. Describe CCR&R consultation is supported by blended funding comprised of CCDF Targeted and set-aside funds
- ☐ X Other funds. Describe CCR&R consultation is supported by blended funding comprised of state general funds and a minimal amount of TANF funds for home provider training & consultation

6.3.4 ☐ X Check to demonstrate that State/Territory assures that CCDF funds will not be used to develop or implement an assessment for children that: (658E(c)(2)(T)(ii)(I))

- Will be the primary or sole basis to determine a child care provider ineligible to participate in the CCDF program
- Will be used as the primary or sole basis to provide a reward or sanction for an individual provider
- Will be used as the primary or sole method for assessing effectiveness of child care programs
- Will be used to deny children eligibility to participate in the CCDF program

7 Support Continuous Quality Improvement

Lead Agencies are required to reserve and use a portion of their Child Care and Development Block Grant funds for activities designed to improve the quality of child care services and increase parental options for, and access to, high-quality child care. States/Territories may provide these quality improvement activities directly, or through grants or contracts with local child care resource and referral organizations or other appropriate entities. The activities should be in alignment with a State/Territory-wide assessment of the State's/Territory's needs to carry out such services and care. States and Territories will report on these quality investments in three ways. ACF will collect annual data on how much CCDF funding is spent on quality activities using the expenditure report (ACF-696). In the Plan, States and Territories will describe the types of activities supported by quality investments over the three-year period. For each three-year Plan period, States and Territories will submit a separate annual report that will show the

measures used by the State/Territory to evaluate its progress in improving the quality of child care programs and services in the State/Territory.

The CCDBG Act of 2014 requires States and Territories to use the quality set-aside to fund at least one of the following 10 activities:

- 1) Supporting the training and professional development of the child care workforce (as described in Section 6)
- 2) Improving on the development or implementation of early learning and development guidelines (as described in Section 6)
- 3) Developing, implementing, or enhancing a tiered quality rating system for child care providers and services
- 4) Improving the supply and quality of child care programs and services for infants and toddlers
- 5) Establishing or expanding a Statewide system of child care resource and referral services (as described Section 1)
- 6) Supporting compliance with State/Territory requirements for licensing, inspection, monitoring, training, and health and safety (as described in Section 5)
- 7) Evaluating the quality of child care programs in the State/Territory, including evaluating how programs positively impact children
- 8) Supporting providers in the voluntary pursuit of accreditation
- 9) Supporting the development or adoption of high-quality program standards related to health, mental health, nutrition, physical activity, and physical development
- 10) Other activities to improve the quality of child care services as long as outcome measures relating to improved provider preparedness, child safety, child well-being, or kindergarten-entry are possible.

Throughout this Plan, States and Territories will describe the types of quality improvement activities where CCDF investments are being made, including but not limited to, the quality set-aside funds. We recognize that for some areas, States and Territories may leverage other funds to support the quality improvement goals, which we encourage and support. For example, activities related to early learning and development guidelines may be supported by a combination of CCDF and education funding. States and Territories continue to have such flexibility.

7.1 Activities to Improve the Quality of Child Care Services

- 7.1.1 What are your overarching goals for quality improvement? Please describe how the State/Territory selected these goals, including any data or the State/Territory-wide assessment of needs that identified the needs for quality improvement services *The Lead Agency's goals for the FFY16-18 timeframe are:*_____

From ffy1415 plan Goal 1 - Increase Quality Rating System (QRS) participation through efforts to 1) reinstate the full QRS award when maintaining a level 2-5*; 2) explore implementing a proportionately higher bonus for providers achieving a Level 5; and 3) adopt protocols for funding of quality projects that support participation in QRS (i.e., require all wraparound grantees to participate, direct TEACH funds to center staff working in QRS-rated programs, etc.)

Goal 2 - Assure the integrity of the QRS rating by developing strategies and recommendations, under the leadership of the QRS Oversight Team, for validating or evaluating the QRS.

- 7.1.2 Check and describe which of the following specified quality improvement activities the State/Territory is investing in:

- ☒ X Developing, implementing or enhancing a tiered quality rating system. If checked, respond to 7.2.
- ☐ Indicate which funds will be used for this activity (check all that apply)
- ☐ X CCDF funds. Describe Targeted and Set-aside
- ☐ Other funds. Describe State General Funds
- ☒ X Improving the supply and quality of child care services for infants and toddlers. If checked, respond to 7.3.
- ☐ Indicate which funds will be used for this activity (check all that apply)
- ☐ CCDF funds. Describe Targeted and Set-aside
- ☐ Other funds. Describe State General Funds
- ☒ X Establishing or expanding a statewide system of CCR&R services as discussed in 1.7. If checked, respond to 7.4.
- ☐ Indicate which funds will be used for this activity (check all that apply)
- ☐ X CCDF funds. Describe Targeted and Set-aside

- ☐ Other funds. Describe State General Funds
- ☒ X Facilitating compliance with State/Territory requirements for inspection, monitoring, training, and health and safety standards (as described in Section 5). If checked, respond to 7.5.
 - ☐ Indicate which funds will be used for this activity (check all that apply)
 - ☐ CCDF funds. Describe Targeted and Set-Aside
 - ☐ Other funds. Describe State General Funds
- ☐ Evaluating and assessing the quality and effectiveness of child care services within the State/Territory. If checked, respond to 7.6.
 - ☐ Indicate which funds will be used for this activity (check all that apply)
 - ☐ CCDF funds. Describe _____
 - ☐ Other funds. Describe _____
- ☐ Supporting accreditation. If checked, respond to 7.7.
 - ☐ Indicate which funds will be used for this activity (check all that apply)
 - ☐ CCDF funds. Describe _____
 - ☐ Other funds. Describe _____
- ☒ X Supporting State/Territory or local efforts to develop high-quality program standards relating to health, mental health, nutrition, physical activity, and physical development. If checked, respond to 7.8.
 - ☐ Indicate which funds will be used for this activity (check all that apply)
 - ☒ X CCDF funds. Describe Targeted Funds
 - ☐ Other funds. Describe State General Funds
- ☐ Other activities determined by the State/Territory to improve the quality of child care services, and for which measurement of outcomes related to improved provider preparedness, child safety, child well-being, or entry into kindergarten is possible. If checked, respond to 7.9.
 - ☐ Indicate which funds will be used for this activity (check all that apply)

☐ CCDF funds. Describe _____

☐ Other funds. Describe _____

NOTE: ONLY COMPLETED BELOW IF CHECKED ABOVE

7.2 Quality Rating and Improvement System

7.2.1 Does your State/Territory have a quality rating and improvement system (QRIS)?

- ☒ X Yes, the State/Territory has a QRIS operating State/Territory-wide.
- ☐ Yes, the State/Territory has a QRIS operating as a pilot, in a few localities, or only a few levels but not fully operating State/Territory-wide.
- ☐ No, but the State/Territory is in the development phase
- ☐ No, the State/Territory has no plans for development

a) If yes, check all that apply to your QRIS.

- ☒ X Supports and assesses the quality of child care providers in the State/Territory
- ☒ X Builds on State/Territory licensing standards and other State/Territory regulatory standards for such providers
- ☒ X Designed to improve the quality of different types of child care providers and services
- ☒ X Describes the safety of child care facilities health and safety tools, etc?
- ☒ X Builds the capacity of State/Territory early childhood programs and communities to promote parents' and families' understanding of the State/Territory's early childhood system and the ratings of the programs in which the child is enrolled
- ☒ X Provides, to the maximum extent practicable, financial incentives and other supports designed to expand the full diversity of child care options and help child care providers improve the quality of services. If checked, please describe how these financial options link to responses in Section 4.3 related to higher payment rates tied to quality. Describe bonus structure. The higher reimbursement incentive linked to families receiving Child Care Assistance is in addition to the achievement bonus the provider is eligible to receive.
- ☒ X Can be used to track trends in whether children receiving subsidy are utilizing rated care settings and level of rating.

b) If yes, which types of settings or distinctive approaches to early childhood education and care participate in the State's/Territory's QRIS? Check all that apply.

- ☒ X Licensed child care centers
- ☒ X Licensed family child care homes
- ☐ License-exempt providers
- ☐ Early Head Start programs
- ☒ X Head Start programs
- ☒ X State pre-kindergarten or preschool program
- ☒ X Programs serving infants and toddlers
- ☒ X Programs serving school-age children
- ☒ X Faith-based settings
- ☐ Other. Describe.

7.2.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory.

7.3 Improving the Supply and Quality of Child Care Programs and Services for Infants and Toddlers

7.3.1 What activities are being implemented by the State/Territory to improve the supply and quality of child care programs and services for infants and toddlers? Check all that apply and describe.

- ☐ Establishing or expanding high-quality community or neighborhood-based family and child development centers, which may serve as resources to child care providers in order to improve the quality of early childhood services provided to infants and toddlers from low-income families and to help eligible child care providers improve their capacity to offer high-quality, age-appropriate care to infants and toddlers from low-income families. Describe. _____
- ☐ Establishing or expanding the operation of community or neighborhood-based family child care networks. Describe. _____

- ☐ Providing training and professional development to promote and expand child care providers' ability to provide developmentally appropriate services for infants and toddlers. Describe. _____
- ☒ X Providing coaching and/or technical assistance on this age group's unique needs from Statewide networks of qualified infant-toddler specialists. Describe. PITC and CCR&R child care consultants with infant and toddler expertise
- ☐ Coordinating with early intervention specialists who provide services for infants and toddlers with disabilities under part C of the Individuals with Disabilities Education Act (20 U.S.C. 1431 et seq.) Describe. _____
- ☐ Developing infant and toddler components within the State's/Territory's QRIS. Describe. _____
 - ☐ Developing infant and toddler components within the State/Territory's child care licensing regulations. Describe. _____
- ☐ Developing infant and toddler components within the early learning and development guidelines. Describe. _____
- ☒ X Improving the ability of parents to access transparent and easy to understand consumer information about high-quality infant and toddler care. Describe. CCR&R parent services
 - ☒ X Carrying out other activities determined by the State/Territory to improve the quality of infant and toddler care provided in the State/Territory, and for which there is evidence that the activities will lead to improved infant and toddler health and safety, infant and toddler cognitive and physical development, or infant and toddler well-being. Describe HCCI
- ☐ Other. Describe _____

7.3.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State's progress in improving the quality of child care programs and services in the State/Territory _____

7.4 Child Care Resource & Referral

7.4.1 Describe the status of the child care resource and referral system

- ☐ X State/Territory has a CCR&R system *operating State/Territory-wide*.
- ☐ State/Territory has a CCR&R system *operating in a few localities* but not fully operating State/Territory-wide.
- ☐ State/Territory is in the development phase

- 7.4.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory _____

7.5 Facilitating Compliance with State Standards

- 7.5.1 What strategies does your State/Territory fund with CCDF quality funds to facilitate child care providers' compliance with State/Territory requirements for inspection, monitoring, training, and health and safety, and with State/Territory licensing standards? Describe: CCR&R consultants, CCR&R training, HCCI ccnc's and training, UP-MCART
- 7.5.2 Describe the measures relevant to this activity that the State will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory: I-Consult Credential, ITPCCNC

7.6 Evaluating and Assessing the Quality and Effectiveness of Child Care Programs and Services

NOT CHECKED ABOVE

- 7.6.1 One of the purposes of the CCDBG Act of 2014 is to increase the number and percentage of low-income children in high-quality child care settings. Describe how the State/Territory measures the quality and effectiveness of child care programs and services offered in the State/Territory, including any tools used to measure child, family, teacher, classroom, or provider improvements, and how the State/Territory evaluates how such programs positively impact children _____
- 7.6.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory _____

7.7 Accreditation Support

NOT CHECKED ABOVE

- 7.7.1 Does the State/Territory support child care providers in the voluntary pursuit of accreditation by a national accrediting body with demonstrated, valid, and reliable program standards of high quality?
- ☐ Yes, the State/Territory has supports operating State/Territory-wide
- ☐ Yes, the State/Territory has supports operating as a pilot or in a few localities but not State/Territory-wide

☐ No, but the State/Territory is in the development phase

☐ No, the State/Territory has no plans for development

7.7.2 If yes, identify all types of accreditation the State/Territory supports child care providers in achieving. _____

7.7.3 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory _____

7.8 Program Standards

7.8.1 What other State/Territory or local efforts, if any, is the State/Territory supporting to develop or adopt high-quality program standards relating to health, mental health, nutrition, physical activity, and physical development? Please describe: ISU-ERS Training, ISU ServeSafe

7.8.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory Need to determine / contract?

7.9 Other Quality Improvement Activities

NOT CHECKED ABOVE

7.9.1 List and describe any other activities the State/Territory provides to improve the quality of child care services and describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving provider preparedness, child safety, child well-being, or entry into kindergarten. _____

8 Ensure Grantee Program Integrity and Accountability

Under CCDF, program integrity and accountability activities are grounded in State/Territory's policies for implementing the CCDF program. For error rate activities, reviews are based on the State/Territory's own CCDF policies. The CCDBG Act of 2014 made sweeping changes to the program requirements. With these changes, the State/Territory has an opportunity to change their own policies to reduce the burden for participants and staff as they build in safeguards to maintain program integrity. For example, the new law focuses on eligibility requirements at the time of eligibility determination and allows for a 12-month period of eligibility before redetermination, which lessens the need for participants to continually provide documentation. This, in turn, relieves the State/Territory from the burden of constantly "checking" on participants which can open the door for miscalculations, lost paperwork, and other errors.

Lead Agencies are required to have accountability measures in place to ensure integrity and to identify fraud or other program violations. These accountability measures should address administrative error, including unintentional agency error, as well as program violations, both unintentional and intentional. Violations may or may not result in further action by the Lead Agency, including those cases suspected of and/or prosecuted for fraud.

8.1 Program Integrity

8.1.1 Describe how the State/Territory ensures that their definitions for violations have been modified, and program integrity procedures revised to reflect new requirements.

a) Fiscal

The budget for child care is based on the projected child care caseloads, anticipated administrative expenditures, and targeted expenditures. The projected revenues are based on the most current federal funding information available and the amount of state funds appropriated.

Expenditures are charged through either cost allocation or directly to the assigned unit in the State's Accounting System (I/3), which allows expenditures to be segregated by activity and funding type. The Department's cost allocation plan serves as the primary control for assuring allowable administrative expenditures are charged to the correct federal funding sources. The expenditures for child care cases are charged through the State's child care system, known as KinderTrack. KinderTrack tracks eligibility and assistance levels for child care.

The I/3 system produces monthly reports of expenditures and revenues detailing budget to actual comparisons. With each payment assigned to a specific unit, monthly reports separate data used to support mandatory, matching, maintenance of effort, or targeted funds.

The budget analyst for the child care program prepares the fiscal report (ACF-696) on a quarterly basis using data obtained from cost allocation reports and the I/3 system. The ACF-696 CCDF Financial Report is reconciled both to the I/3 system and the federal payment management system.

b) Data

The KinderTrack system allows for much richer information regarding eligibility and payment for services. All eligibility for direct child care services paid by pooled CCDF funds is administered via this system, as are payments for those services. The Lead Agency continues to dedicate resources to a data analyst staff position who has responsibility to provide information and reports to internal and external stakeholders and to the public.

c) Error Rate

The Lead Agency will conduct ongoing quality control reviews of cases with respect to eligibility determination and authorizations. Lead Agency data analyst and quality control staff will compile and report error rate information, update the corrective action plan, and ensure that any error findings lead to an opportunity for learning and system improvement. The Lead Agency will continue to produce the ACF-400, ACF-401 and ACF-402 reports on the designated reporting schedule.

8.1.2 Describe how the State/Territory ensures that all staff are informed and trained regarding changes made to its policies and procedures to reflect new CCDF requirements. Check all that apply.

- ☐ Issue policy change notices
- ☐ Issue new policy manual
- ☒ X Staff training
 - ☐ Orientations
 - ☒ X Onsite training
 - ☐ Online training
- ☐ Regular check-ins to monitor implementation of the new policies. Describe ____
- ☒ X Other. Describe The Income Maintenance Training Academy conducts policy/procedure training on child care assistance as well as child care system training for all Child Care Registration and Payment staff on a regular basis

Child Care Licensing Consultants meet quarterly and receive some training. Regulatory staff working with Child Development Homes meet bi-annually and also participate in monthly CIDS calls.

8.1.3 Describe the processes the Lead Agency will use to monitor all sub-recipients, including those described in Section 1 such as licensing agencies, child care resource and referral agencies, and others with a role in administering CCDF. The Lead Agency is responsible for ensuring effective internal controls over the administration of CCDF funds. Lead Agencies that use other governmental or non-governmental sub-recipients to administer the program must have written agreements in place outlining roles and responsibilities for meeting CCDF requirements.

Definition: “Subrecipient means a non-Federal entity that receives a subaward from a pass-through entity to carry out part of a Federal program; but does not include an individual that is a beneficiary of such program. A subrecipient may also be a recipient of other Federal awards directly from a Federal awarding agency (2 CFR 200.93). Two CFR Part 200, Subpart A provides additional information on contractors (which may be referred to as “vendors”). The description of monitoring must include, but is not limited to, a description of the written agreements used, a schedule for completing the tasks, a budget which itemizes categorical expenditures consistent with CCDF requirements and indicators or measures to assess performance. Additional items for discussion may include: fiscal management, review of policies and procedures to ensure compliance with CCDF regulations, and monitoring/auditing contractors or grantees to ensure that eligible children are served and eligibility documentation is verified.”

The Department does not contract out direct services for the Child Care Assistance program or licensing/monitoring. Contracts are issued for quality improvement efforts. The following describes the monitoring process for these contracts:

- Contracts include written information about the monitoring procedure, which includes any planned, ongoing, or periodic activity that measures and ensures contractor compliance with the terms, conditions, and requirements of the contract. Monitoring activities include, but are not limited to, periodic contractor reporting, invoice reviews, and periodic contact with the contractor.
- Fiscal monitoring includes a review of the contractor’s invoices and supporting documentation.
Monitoring includes verifying that services were delivered as detailed in the contract, invoices are accurate, billings are consistent with contract requirements, and total payments are within the limits set by the contract.
- Specific performance measures are included in contracts and clearly identify the purpose of the contract, the services/activities that are the basis for the contract and the contract parameters. Reporting requirements and target and performance thresholds are also included in contracts.

- 8.1.4 Describe the activities the Lead Agency has in place to identify program violations and administrative error to ensure program integrity using the series of questions below. Program violations may include intentional and unintentional client and/or provider violations as defined by the Lead Agency. Administrative error refers to areas identified through the Error Rate Review process. Lead Agencies are required to have processes in place to identify fraud or other program violations.

- a) Check which activities (or describe under “Other”) the Lead Agency has chosen to conduct to identify unintentional or intentional program violations.
- ☐ X Share/match data from other programs (e.g., TANF, Child and Adult Care Food Program (CACFP), Food and Nutrition Service (FNS), Medicaid)) or other databases (e.g., State Directory of New Hires, Social Security Administration, Public Assistance Reporting Information System (PARIS))
 - ☐ Run system reports that flag errors (include types). Describe _____
 - ☐ X Review of enrollment documents, attendance or billing records
 - ☐ X Conduct supervisory staff reviews or quality assurance reviews
 - ☐ Audit provider records
 - ☐ X Train staff on policy and/or audits
 - ☐ Other. Identify the activity: _____
 - ☐ None. Describe what measures the Lead Agency plans to put in place to address program integrity along with action steps and completion timelines _____
- b) Check which activities (or describe under “Other”) the Lead Agency has chosen to conduct to identify administrative error.
- ☐ X Share/match data from other programs (e.g. TANF, Child and Adult Care Food Program (CACFP), Food and Nutrition Service (FNS), Medicaid)) or other databases (e.g., State Directory of New Hires, Social Security Administration, Public Assistance Reporting Information System (PARIS))
 - ☐ Run system reports that flag errors (include types). Describe _____
 - ☐ X Review of enrollment documents, attendance or billing records
 - ☐ X Conduct supervisory staff reviews or quality assurance reviews
 - ☐ Audit provider records
 - ☐ X Train staff on policy and/or audits
 - ☐ Other. Identify the activity: _____
 - ☐ None. Describe what measures the Lead Agency plans to put in place to address program integrity along with action steps and completion timelines _____

8.1.5 Which activities (or describe under “Other”) the Lead Agency will use to investigate and collect improper payments due to program violations or administrative error as defined in your State/Territory? The Lead Agency has the flexibility to recover misspent funds as a result of errors. The Lead Agency is required to recover misspent funds as a result of fraud.

a) Check which activities (or describe under “Other”) the Lead Agency will use for unintentional program violations ?

- ☐ Require recovery after a minimum dollar amount in improper payment. Identify the minimum dollar amount _____
- ☒ X Coordinate with and refer to other State/Territory agency (e.g., State/Territory collection agency, law enforcement)
- ☒ X Recover through repayment plans
- ☐ Reduce payments in subsequent months
- ☒ X Recover through State/Territory tax intercepts
- ☐ Recover through other means
- ☐ Establish a unit to investigate and collect improper payments. Describe composition of unit below
- ☐ Other. Identify the strategy. _____
- ☐ None. Describe what measures the Lead Agency plans to put in place to address the investigation and recovery of misspent funds due to unintentional program violations, including action steps and completion timelines _____

b) Check which activities (or describe under “Other”) the Lead Agency will use for intentional program violations or fraud?

- ☐ Require recovery after a minimum dollar amount in improper payment. Identify the minimum dollar amount _____
- ☒ X Coordinate with and refer to other State/Territory agency (e.g. State/Territory collection agency, law enforcement)
- ☒ X Recover through repayment plans
- ☐ Reduce payments in subsequent months
- ☒ X Recover through State/Territory tax intercepts
- ☐ Recover through other means
- ☐ Establish a unit to investigate and collect improper payments. Describe composition of unit below
- ☐ Other. Identify the strategy. _____
- ☐ None. Describe what measures the Lead Agency plans to put in place to address the investigation and recovery of misspent funds due to fraud, including action steps and completion timelines _____

c) Check which activities (or describe under “Other”) the Lead Agency will use for administrative error?

- ☐ Require recovery after a minimum dollar amount in improper payment. Identify the minimum dollar amount _____
- ☒ X Coordinate with and refer to other State/Territory agency (e.g. State/Territory collection agency, law enforcement)
- ☒ X Recover through repayment plans
- ☐ Reduce payments in subsequent months
- ☒ X Recover through State/Territory tax intercepts
- ☐ Recover through other means
- ☐ Establish a unit to investigate and collect improper payments. Describe composition of unit below
- ☐ Other. Identify the strategy. _____
- ☐ None. Describe what measures the Lead Agency plans to put in place to address the investigation and recovery of misspent funds due to administrative error, including action steps and completion timelines _____

8.1.6 What type of sanction will the Lead Agency place on clients and providers to help reduce improper payments due to program violations? The Lead Agency is required to impose sanctions on clients and providers in response to fraud.

- ☐ Disqualify client. If checked, please describe, including a description of the appeal process for clients who are disqualified. _____
- ☒ X Disqualify provider. If checked, please describe, including a description of the appeal process for providers who are disqualified.

If a child care provider is convicted of fraudulently receiving Child Care Assistance (CCA) funds, they are subject to sanctions from the CCA program. There are three levels of sanctions that may be imposed:

- Review of the provider's claims for payment from the CCA program.
- Suspension from receipt of CCA payments for six months.

Ineligibility to receive further CCA payments.

The type of sanction imposed on the provider depends upon the nature of the fraudulent practice. The Department's central office staff will consider the following factors in determining what type of sanction to impose:

Prior violations or sanctions.

- Seriousness of the violation.
- Extent of the violation.
- Whether a lesser sanction will be sufficient to remedy the problem because the provider has received education or instruction and is willing to follow program rules in the future.

Department staff take the following steps when imposing a provider sanction:

1. Upon notification by the Department of Inspections and Appeals (DIA) that a provider has been convicted of fraudulently receiving CCA funds, the Department's central office staff will determine which level of CCA sanction will be imposed.
2. Once the Department's central office has determined the type of CCA provider sanction that will be imposed, the Department's child care staff for the county where the provider is located will be notified by e-mail to send the provider a *Notice of Decision: Child Care Assistance* to cancel the *Child Care Assistance Provider Agreement* and impose the sanction. The Department's central office will also send this e-mail to the state level PROMISE JOBS coordinator who will notify the appropriate PROMISE JOBS county offices.

The effective date of the *Notice of Decision: Child Care Assistance* imposing the sanction shall be the first of the month following timely and adequate notice requirements. A copy of this notice should be sent to the corresponding PROMISE JOBS county office.

If a provider attempts to reapply to receive CCA funding for child care before the sanction has ended, send the provider a *Notice of Decision: Child Care Assistance* to deny the request for a new *Child Care Assistance Provider Agreement*.

NOTE: This sanction does not affect the provider's ability to remain registered or licensed. The sanction affects only eligibility to receive CCA funding from the Department.

A provider has the right to file an appeal if they disagree with any Department decision. They do not have to pay to file an appeal

The provider must appeal in writing by doing one of the following:

- Complete an appeal electronically at <https://dhssecure.dhs.state.ia.us/forms/>, or
- Write a letter telling us why they think a decision is wrong, or

- Fill out an Appeal and Request for Hearing form. They can get this form at any county DHS office.

The provider then sends or takes the appeal to the Department of Human Services, Appeals Section, 5th Floor, 1305 E Walnut Street, Des Moines, Iowa 50319-0114. If the provider needs help filing an appeal, they may ask their county DHS office for assistance.

The provider must file an appeal:

- Within 30 calendar days of the date of a decision or
- Before the date a decision goes into effect.

If they file an appeal more than 30 but less than 90 calendar days from the date of a decision, they must tell us why their appeal is being filed late. If the provider has a good reason for filing the appeal late, the Appeals Section will decide if they can get a hearing. If the provider files an appeal 90 days after the date of a decision, a hearing cannot be given.

The provider may keep continue receiving payment until an appeal is final or through the end of their certification period if they file an appeal:

- Within 10 calendar days of the date of a decision or
- Before the date a decision goes into effect

Any payment received while the appeal is being decided may have to be paid back if the Department's action is correct.

If the applicant is granted a hearing before an administrative law judge and does not agree with the final decision of the hearing, he or she may request a rehearing. The director of the department of human services determines if a rehearing will be granted. If a director's review is requested, and the individual is dissatisfied with the final decision, the individual may file for judicial review in district court.

- ☒ X Prosecute criminally
- ☐ Other. Describe. _____